REACHING HIGHER:
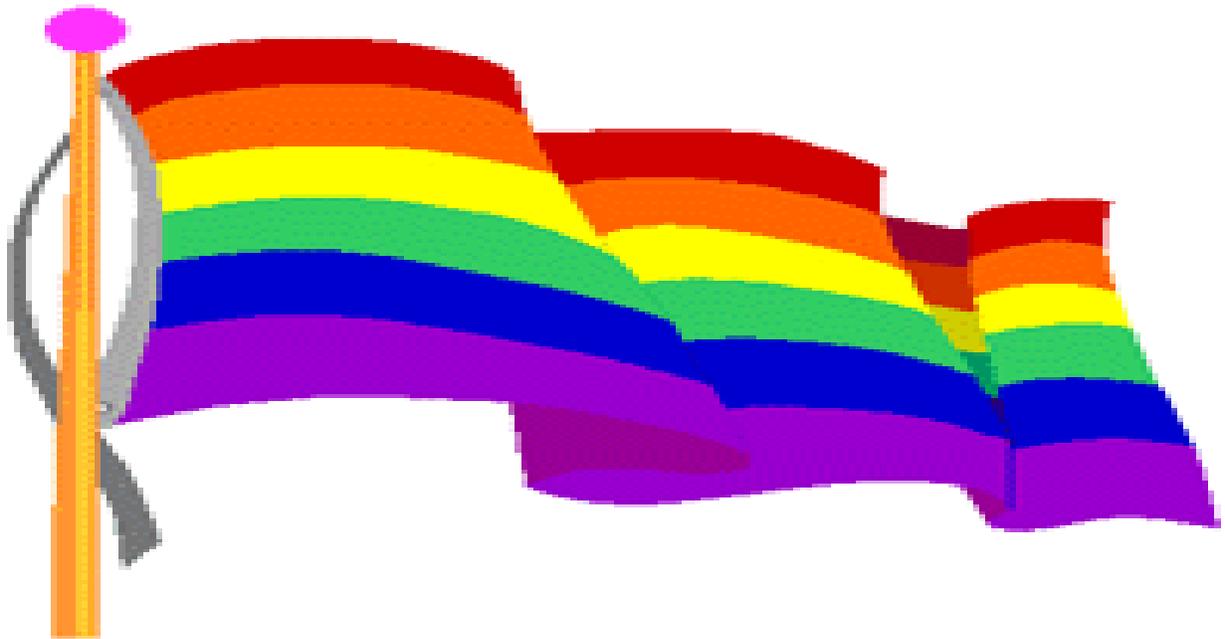# A Curriculum for Foster/Adoptive Parents and Kinship Caregivers Caring for LGBTQ Youth

Facilitator's Curriculum Guide

Modules 1-9

Introduction

This curriculum was developed with the National Center for Child Welfare Excellence as a tool to help prepare foster, kinship, adoptive, and guardianship parents to care for LGBTQ youth.

In developing this curriculum we relied heavily on content from the following resources. Most of the time there is a citation that is specifically applied within the curriculum. But we acknowledge the significant work of these resources in promoting an overall philosophy and approach to the work that may at times defy application of specific citations.

- *Getting Down to Basics: Tools to Support LGBTQ Youth in Care.* Child Welfare League of America and Lambda Legal. 2002.
- *Working with LGBTQ Youth: A Youth Worker's Perspective. Gerald P. Mallon, CWLA, 2010.*
- Best Practice Guidelines for Serving LGBTQ Youth in Out-of-Home Care. Child Welfare League of America. Washington, DC. 2006.
- *Research Briefs from the Gay, Lesbian, and Straight Education Network (GLSEN)* including Findings from the 2007 National School Climate survey.
- *Recommended Practices: To Promote the Safety and Well-Being of Lesbian, Gay, Bisexual, Transgender and Questioning Youth and Youth at Risk of or Living with HIV in Child Welfare Settings.* Child Welfare League of America. 2012.
- *Supporting Your LGBTQ Youth: A Guide for Foster Parents.* Child Information Gateway. May 2013.
- Perry, J.R. (2013). *Respect, Include, & Empower: Providing Culturally Competent Services for Lesbian, Gay, Bisexual, Transgender & Questioning Youth in ACS Care (Training Curriculum).* New York City, NY: New York City's Administration for Children's Services.

We wish to acknowledge Dr. Gerald P. Mallon, Executive Director of the National Center for Child Welfare Excellence for his vision to be among the first to develop services for LGBTQ youth who have been adopted, in foster care and for his guidance in developing this competency-based training model.

SPECIAL INFORMATION FOR FACILITATORS

Reaching Higher: Caring for LGBTQ Youth was developed by the National Center for Child Welfare Excellence in an effort to reach an improved level of service delivery for LGBTQ youth and their families. The curriculum was developed to increase the competence of any family providing out of home care for youth—foster/adoptive families, kinship care families, guardianship families, or adoptive families. The curriculum is meant to enhance the skills of those providing direct care for LGBTQ youth. The curriculum with some adaptation may also be helpful for those providing care in group homes and residential care facilities.

The curriculum is divided into modules:

- Modules 1-4 provide introductory information designed to help participants assess their own values and beliefs, learn basic information about the risks and needs of LGBTQ youth and families, and develop basic skills in using language that is accurate and respectful.

- Modules 5-9 focus on blocks of information (related to supporting LGBTQ youth and working with their families) that are then incorporated into skill development through a series of fast paced scenarios entitled "What to Say, What to Do".

- The modules lend themselves to a full day of training with modules 1 through part of Module 5 in the morning (3.5 hours) and the remainder to Module 5 through 9 in the afternoon (3.5 hours); or two evenings or half days.

It is recommended that the training be provided by a co-training team, with one trainer being a resource parent (foster, kinship, guardianship, or adoptive) and the other trainer being a child welfare professional. It is ideal if one trainer is LGBTQ or has expertise in working with the LGBTQ population. However, it is recognized that in all public child welfare agencies there may not be a current level of expertise regarding LGBTQ issues. Therefore the curriculum is written with significant detailed information including suggested responses for all the group discussions and activities.

The following will assist you in knowing how to navigate and utilize the curriculum:

- "⬓" designates the use of a power point slide. The use of slides is not necessary, but may enhance the learning experience if the equipment is available.

- Module-at-a-Glance provides the Facilitator with an overview of each module including what handouts and materials are needed.

- Handouts can be copied into one booklet and provided to participants at the beginning of the training day.

- In most cases the content of the handouts is incorporated directly into the Facilitator's Curriculum Guide.   When this is done it is immediately visible to the Facilitator as the font is smaller and there is a perpendicular line in the right margin. (By copying the handout into the curriculum the facilitator can avoid going back and forth from the curriculum to the handouts.)

We strongly urge all trainers to download and review the resources cited in the previous "Introduction". These materials reflect some of the best research and practice that has developed in the past years. The developers of these materials have spent many years identifying best practices. Most of these resources can be found on the web and may be downloaded at no charge.

COMPETENCIES AND LEARNING OBJECTIVES

Module One Competency and Learning Objectives:

Is aware of the importance of improving child welfare practice with LGBTQ youth.
- Get acquainted with trainers and one another
- Identify specific learning needs related to serving LGBTQ youth

Module Two Competency and Learning Objectives:

Knows and understands the impact and scope of LGBTQ youth in the foster/adoptive care system.
- Explain the impact that foster/adoptive care placement has on LGBTQ youth
- Explain the current safety and risk factors affecting LGBTQ youth in foster/adoptive care

Module Three Competency and Learning Objectives:

Knows and understands personal, religious, and cultural views and values that influence foster parents' perspectives on LGBTQ youth and families and be able to develop strategies that balance personal beliefs and professional responsibilities.
- Clarify one's personal, religious, and cultural beliefs and values regarding sexual orientation, gender identity expression
- Identify strategies for balancing personal views with professional responsibilities
- Explain common myths and stereotypes of LGBTQ people/culture and understand accurate information regarding these myths/stereotypes

Module Four Competency and Learning Objectives:

Knows and understands the differences in terminology associated with sexual orientation, sex, and gender and can integrate and apply this information for conversations with youth and families.
- Explain the differences between sexual orientation, sex, and gender
- Increase competency in using accurate and culturally appropriate terminology

Module Five Competency and Learning Objectives:

Knows and understands effective engagement strategies for working with LGBTQ foster/adoptive youth and families.
- Appreciate the issues and concerns presented by families of LGBTQ young people.
- Describe engagement strategies for strengthening and supporting the families of LGBTQ young people.

- Describe permanency planning strategies to help ensure lifelong supportive connections.

Module Six Competency and Learning Objectives:

Knows how to manage day to day issues that arise in the foster/adoptive home when caring for LGBTQ youth.
- Describe how to ensure safety related to sleeping arrangements.
- Describe ways to ensure appropriate rules and boundaries to ensure safety within the home.
- Describe how to establish appropriate expectations regarding LGBTQ romantic and sexual relationships.

Module Seven Competency and Learning Objectives:

Knows and understands how to assess, support, and affirm a young person in the process of "coming out."
- Describe the role of the foster parent in supporting LGBTQ youth.
- Explain common issues around "coming out" and how they might affect young people in out-of-home care.
- Know that "coming out" is not about sexual behavior, but about the recognition and disclosure of one's self-identity and relational preferences; both of which are critical to psychological, emotional, and social development.
- Explain the potential consequences of social and emotional isolation and discrimination on sexual and gender minority clients.

Module Eight Competency and Learning Objectives:

Knows and understands how to advocate for LGBTQ young people in their home, school, foster/adoptive care setting, and community.
- Describe two advocacy strategies for supporting LGBTQ young people.
- Describe two challenges a LGBTQ youth might face in their family, school, community, or church; and identify advocacy strategies.

Module Nine Competency and Learning Objectives:

Identify ways to increase one's own competence in working with LGBTQ youth and families.
- Evaluate one's own competence in working with LGBTQ youth and families.
- Develop an action plan to identify specific tasks to increase learning and competence in working with LGBTQ youth and families.

Modules-at-a-Glance:

Module Name	Time	Methods	Materials Needed
Module One: Introductions and Workshop Overview	20 mins	Introductions Digital story	✓ Easel pad and markers ✓ Handout: Competencies and Objectives ✓ Digital Story: Penny ✓ Computer and equipment for digital story ✓ Prepared Easel Pad Page ✓ A large post-it at each seat
Module Two: Let's Look at the Facts	60 mins	Small groups Lecture Guided discussion	✓ Index cards with research findings from Trainer's Resource at end of module ✓ Handout #1: LGBTQ Youth and Risk ✓ Handout #2: LGBTQ Youth in the Child Welfare System—How are We Doing? ✓ Handout #3: Research to Practice
Module Three: Packing My Suitcase	60 mins	Large group activity Group/work station Small group discussion	✓ Large Index Card ✓ A sign reading "Very comfortable" and a sign reading "Not at all comfortable" ✓ 4-6 work prepared work stations with easel pad pages and markers ✓ Handout #4: Beliefs and Sources of Information ✓ Handout #5: Myth/Fact Sheet ✓ Handout #6: Packing and Unpacking My Suitcase
Module Four: Talking the Talk	35 mins	Large group activity Guided group discussion	✓ Prepared easel pad page with "Terms" ✓ Handout #7: Definitions of LGBTQ Terms ✓ Prepared Index Cards with a term on each card
Module Five: Affirming Engagement with LGBTQ Youth	70 mins	Digital Story Group project Skill application	✓ Digital Story: Jimmy (You may access this digital story at the web site of the National Resource Center for Permanency and Family Connections at http://www.nrcpfc.org/digital_stories/YP_John_J/index.htm) ✓ Computer and equipment for digital story

			✓ Handout #8: My Role in Working with LGBTQ Youth ✓ Handout #9: A Safe and Affirming Family ✓ Handout #10: Promoting Safety and Well-being for LGBTQ Youth in Care ✓ Handout #11: What to Say, What to Do (Engagement)
Module Six: Nuts and Bolts	1 hr and 15 mins	Presentation and Skills Application	✓ Handout #12: Let's Get Real ✓ Handout #13: Addressing Safety Concerns—Sleeping Arrangements ✓ Handout #14: Strategies, Boundaries, and Rules to Promote Safety ✓ Handout #15: What to Say, What to Do (Safety) ✓ Handout #16: What to say, What to Do (Supporting Healthy Sexual Development) ✓ Small index card placed at each seat
Module Seven: Supporting Youth in the process of Coming Out	60 mins	Group discussion Presentation and Skill Application	✓ Handout #17: Stages of LGBTQ Formation ✓ Handout #18: Supporting Youth in the Coming Out Process ✓ Handout #19: What to Say, What to Do (Coming Out) ✓ Handout #20: Supporting Transgender Youth
Module Eight: Advocacy and Community Connections	25 mins	Group Discussion Presentation and Skill application	✓ Handout #21: Advocating for LGBTQ Youth ✓ Handout #22: What to Say, What to Do (Advocacy)
Module Nine: Closing and Evaluation	10 mins	Action Planning	✓ Handout #23: LGBTQ Resources ✓ Handout #24: Action Plan ✓ LGBTQ Resources

MODULE ONE: INTRODUCTIONS AND WORKSHOP OVERVIEW

Time
20 minutes

Competency
Is aware of the importance of improving child welfare practice with LGBTQ youth.

Objectives
- Get acquainted with trainers and one another
- Identify specific learning needs related to serving LGBTQ youth

Materials
- ✓ Easel pad
- ✓ Markers
- ✓ One large sized Post-It at each seat (encourage everyone to write on it as they are waiting)
- ✓ *Handout: Competencies and Objectives*
- ✓ Digital Story: Penny
- ✓ Computer and equipment for viewing of digital story

Prepared Easel Pad Page
INTRODUCTIONS
- Name
- Your Role (Foster, Adoptive, or Kinship?)
- Number of years and any experience caring for LGBTQ youth
- Read the identified skill on the Post-It

Welcome foster/adoptive parents and kinship caregivers (and any other types of caregivers who may be invited including adoptive parents or guardianship parents). Introduce self and colleagues. Provide background information and share professional experiences related to working with children and families in the child welfare system as well as your particular interest in improving practice with LGBTQ youth and families. Set ground rules for the session.

Examples of Ground Rules:

- Only one conversation at a time.
- Training starts at 8:30—please be on time.
- Respect one another's opinions.
- Participation is expected.
- There are no stupid questions
- No one will attack you if you are not using the politically correct terms
- Participants need to tell trainers if they are lost or do not understand

⊿**Refer** participants to the *Handout: Competencies and Objectives* and review with the group. Post the timeframes (lunch, breaks, and end time) on a flip chart and also review with the group.

Ask participants to identify one specific skill they wish to gain or improve through participation in this training and to write this on the Post-It that is in front of them. Note that you will be taking these up so that no one will be able to identify who is writing what. When participants have finished go around and take up the Post-Its and then redistribute them around the room.

⊿**Refer** participants to prepared easel pad page and ask participants to introduce themselves by stating their name, role (foster, adoptive, guardianship or kinship parent), number of years, any experience caring for LGBTQ youth, and then to read what is written on the Post-It. Record the responses and comment whether or not the training will likely address that particular skill. If the skill will not be addressed let participants know that you will pass this training need on to the appropriate staff.

Thank participants for sharing and summarize by:

- Noting if there were similarities in the types of skills participants wish to gain from participating in the training;
- Ensuring participants the training will address many of their identified training needs;
- Acknowledging that all in the room are interested in improving practice and work with LGBTQ youth and families;
- Noting that you as a trainer hope to gain new skills and understanding of practice challenges by listening to their experiences.

Introduce the *Digital Story: Penny* to participants.

- Explain this is an inspirational story of a foster parent that was recorded by the National Resource Center for Permanency and Family Connections.

- Note this story is a good introduction to the training as it presents the importance of having competent and motivated families to care for our LGBTQ youth in care.

Ask for reactions to the digital story.

State this training will explore new skills and best practices in working with LGBTQ youth and families, but to get started there will be a review of some of the knowledge, research, and data that have led us to develop and refine our practice.

MODULE TWO: LET'S LOOK AT THE FACTS

Time
60 minutes

Competency
Knows and understands the impact and scope of LGBTQ youth in the foster/adoptive care system.

Objectives
- Explain the impact that foster/adoptive care placement has on LGBTQ youth
- Explain the current safety and risk factors affecting LGBTQ youth in foster/adoptive care

Materials
- ✓ 7 Large index cards with research findings (See Trainer's Resource at end of module)
- ✓ *Handout #1: LGBTQ Youth and Risk*
- ✓ *Handout #2: LGBTQ Youth in the Child Welfare System—How are We Doing?*
- ✓ *Handout #3: Research to Practice*

- ✓ Prepared easel pad page (if you are not using the power point):

  To what degree does this information/research/data surprise you?
  What implications does this information have for how we approach our work with LGBTQ youth and families?

⊠**Introduce** this module by reviewing the competency and learning objectives with participants.

Explain there is a lot of information and research regarding LGBTQ youth, safety and risk factors that impact them, and how child welfare and other systems have been challenged to better meet their needs. Note that this research and information can be very helpful in looking at ways we can improve practice.

Note LGBTQ youth are at high risk within the general population, as well as within the child welfare population for poorer outcomes in overall health and well-being and for this reason it is particularly important we learn better ways to work with our LGBTQ youth.

Explain before you begin to review these risks it is important participants understand that most of these risks develop due to misunderstanding and lack of acceptance within our culture.

Ask participants to identify some of the varying experiences that LGBTQ youth may have due to a lack of understanding and acceptance.

Ensure that the following types of experiences are identified:
- Bullied at school
- Hear negative comments
- Suicidal thoughts or gestures
- May be thrown out of the house or ostracized by family members
- Hide their sexual/gender identity expression and/or live in fear that others will find out
- Feel different all the time

Ask participants what they think the impact of these experiences is likely to be in the long run.

Encourage the following types of responses:
- Make it very hard for the youth to have high self-esteem
- Feelings of isolation and depression
- Substance use or abuse
- Feelings of anger
- High anxiety
- Lead to running away

Summarize the discussion by making the following points:

- The impact of isolation, feeling different and often unloved and unaccepted is indeed very challenging. Remember also that this is happening along with the already challenging tasks of adolescence.

- It is no surprise that when faced with these challenges LGBTQ youth may be overwhelmed.

- Feelings of being overwhelmed with depression, grief, or anxiety may lead to poor decisions in some cases (such as use of substances to self-medicate); however some decisions may actually reflect how bleak the options really are for the youth (such as a youth who runs away after being repeatedly abused in his or her family).

- It is critical that you understand the context in which risk is heightened for these youth. It is NOT because they are inherently less able or less healthy than non-LGBTQ youth. The risks are heightened due to the isolation, stigma, bullying, harassment, and overall lack of acceptance that many LGBTQ youth experience.

⌧**Refer** participants to *Handout: LGBTQ Youth in the Child Welfare System—How are We Doing?* and review.

- 78% of youth in placement reported being removed or running away from placements because of hostility toward their sexual orientation or gender identity expression. *(Urban Justice Center 2001)*

- LGBTQ youth in a 2002 study reported an average of 6.35 placements. *(Mallon, Aledort, and Ferrera, 2002)*

- Foster/adoptive parents may pressure youth to change their sexual orientation suppress their sexual identities or send them back to the agency. *(Clements and Rosenwald. Foster Parents' Perspectives on LGB Youth in the Child Welfare System. Journal of Gay and Lesbian Social Services, 19(1), 57-58.)*

- Permanency is rarely viewed as an option for LGBTQ youth. (Jacobs and Freundlich, *Achieving Permanency for LGBTQ Youth*. Child Welfare, 85(2), 299-316.

Ask participants for their reaction to this information, especially as it relates to youth running away from placements because of hostility shown toward them. Ask participants if they are surprised at any of the information. Further the discussion by asking participants why they think the data indicates such poor outcomes.

Summarize the discussion by noting the following points:

- We are clearly being called to action.

- As foster/adoptive parents and kinship caregivers it is especially disheartening to hear that youth have had such bad experiences with their foster/adoptive and kinship families.

- While the data presents a discouraging picture it also presents us with the opportunity to take stock of the facts—and commit ourselves to doing better.

- Regardless of personal, religious, or moral beliefs it is obvious that we have a population of youth who are suffering. We need the systems that are set up in our society to provide help to "step up to the plate."

- The federal government has made a formal call to action, issuing a directive memo from the Health and Human Services Administration on Children, Youth, and Families encouraging child welfare agencies to better serve the needs of LGBTQ youth in care; the directive calls for

increased training and identified LGBT prospective parents as an untapped resource for better serving LGBTQ youth.

Emphasize that data and research inform all aspects of child welfare practice. Note that studies in the 70's of foster care drift led to permanency planning efforts that have continually been revised as best practices are documented and continue to evolve. Note that while it is sometimes discouraging to review poor outcomes, it also gives us the opportunity to make changes and seek best practices. Emphasize the importance of studying the data and research, and seeking ways to continue to define better practices.

⌂**Conduct** an activity "Research to Practice" designed to help participants take research and think about how the findings of the research can be utilized to strengthen care for LGBTQ youth and families.

- Post each of the Research Topics on laminated cards and post around the training room

- Ask each participant to do a "Gallery Walk" to briefly view each card and ask the following after everyone has viewed each:

  o To what degree does this information/research/data surprise you?

  o What implications does this information have for how we approach our work with LGBTQ youth and families?

- Call time after 10 minutes.

Use the following information to assist you in processing the activity

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Research A: Demographics

Between 5 and 10% of the general population is LGBT. It is likely that youth in out-of-home care in the child welfare system represent an even higher percentage.

Mallon noted that child welfare workers often do not identify that they have LGBTQ youth on their caseloads, drawing concern that workers are not communicating with youth in a way that leads youth to be comfortable identifying as LGBTQ. Likewise, foster/adoptive parents and kinship caregivers may also fail to recognize LGBTQ youth.

This estimate comes from the assumption that 5-10% of the general population is LGBT. John C. Gonsiorek and James D. Weinrich, "The Definition and Scope of Sexual Orientation," in Homosexuality: Research Implications for Public Policy (Newbury Park, CA: Sage Publications, 1991.) Courtney, Dworsky, Lee, and Raap (2009) found a much higher percentage of youth in foster/adoptive care who identified as something other than fully heterosexual. Mid-west Evaluation Former Foster Youth.

Mallon, G.P. Let's Get this Straight: A Gay and Lesbian Affirming Approach to Child Welfare. New York: Columbia University Press. (2000) and Mallon, G.P. We don't exactly get the welcome wagon: The experience of gay and lesbian adolescents in child welfare systems. New York: Columbia University Press. 1998.

- To what degree does this information/research/data surprise you?

  Participants may have varying reactions to these demographics. The discussion may raise questions regarding definitions of lesbian, gay, bi-sexual, transgender, and questioning. Note that later in the morning the group will explore these definitions in greater details. If participants are surprised at the research showing that child welfare workers and foster/adoptive parents may have a lack of awareness of LGBTQ youth on their caseload it may be helpful to briefly discuss why they think this may be the case.

- What implications does this information have for how we approach our work with LGBTQ youth and families?

  o First and foremost this tells us that we cannot deny the foster/adoptive care system is working with large numbers of youth who are LGBTQ. Since this is a significant part of the population that we serve, it is critical that we work to develop the best practices possible in order to better meet their needs.

  o The child welfare community, including foster/adoptive parents and kinship caregivers, need to develop a more welcoming and supportive approach to working with LGBTQ youth, use language that is less heterocentric, and develop a greater sensitivity to the needs of LGBTQ youth.

  o Foster/adoptive parents need strategies for engaging with LGBTQ youth and ensuring safety for youth who identify as LGBTQ.

Research B: Demographics and Homelessness

Existing literature documents that LGBTQ populations have been acknowledged to a greater extent by social services directed toward runaway and homeless youth than within child welfare settings. Many youth experiencing homelessness are living on the streets because they view it as safer or preferable to child welfare placements where they have experienced verbal or physical harassment and a lack of understanding. 52% of youth experiencing homelessness have had some involvement with the foster/adoptive care system at some point in their lives.

Mallon, G. 1998. We don't exactly get the welcome wagon: The experiences of gay and lesbian adolescents in child welfare systems. New York: Columbia University Press.
Mallon, G. and Woronoff, R. 2006. Busting out of the child welfare closet: Lesbian, gay, bi-sexual, and transgender affirming approaches to child welfare. Child Welfare 85(2): 115-122.
Byrne, et.al. 2005. Quality health care for homeless youth: Examining barriers to care. Presented at Children's Aid Society, New York. July 26, 2005.

- To what degree does this information/research/data surprise you?

  This information may invoke deep concern in participants as this can be interpreted as a direct indictment of how poorly the child welfare system has worked with LGBTQ youth and how disheartening it is to know that LGBTQ youth have had bad experiences in the foster/adoptive homes that are set up to protect them. Foster/adoptive parents who have been trained in trauma informed care will readily recognize the extent to which our LGBTQ youth are re-traumatized by coming into care. It may be the first time that foster/adoptive parents have directly thought about this impact, or been confronted with realizing that a youth would rather be on the streets than involved with child welfare services.

- What implications does this information have for how we approach foster/adoptive care for LGBTQ youth?

  o This raises the immediate issue that as foster parents we need to do what we can to help the youth return home if possible. If the family can be helped to become more accepting and supportive of the youth then the running away, homelessness, and placement can all be avoided.

  o Clearly we must determine more effective ways to engage with LGBTQ youth and ensure their needs are better met.

  o Highlights the importance of working with street outreach and homeless programs in order to better reach, engage, and connect to LGBTQ youth.

  o Youth who end up living on the streets, after having experiences of placement or being forced to leave their homes, are clearly experiencing multiple levels of trauma and loss.

  o Highlights the need for good foster/adoptive parent training so that as foster/adoptive parents we can be more competent and committed to working with LGBTQ youth.

Research C: Resilience—the Role of Family

The single most significant factor in predicting resilience and positive outcomes for LGBTQ youth is a family that is accepting and supportive of the youth. Caitlin Ryan, a social worker for the Family Acceptance Project at San Francisco State has managed this multi-year mixed methods study. Ryan also found there are effective ways to work with families to help them modify rejecting behaviors and increase their level of support.   These efforts ultimately lead to strengthening families and helping LGBTQ youth to remain at home.

Ryan, Caitlin. 2010. Engaging families to support lesbian, gay, bisexual, and transgender youth: The Family Acceptance Project. <u>Prevention and Researcher</u> 17(4): 11-13.

- To what degree does this information/research/data surprise you?

   It is likely that participants will indicate they are aware of the importance of family. In the media there is often negative information regarding how parents respond, so some participants may indicate surprise that the research shows that parents can learn ways to more supportive.

- What implications does this information have for how we approach our work with LGBTQ youth and families?

   o *This highlights how important the role of the foster/adoptive family or kinship family is in providing acceptance and support to the youth.*

   o *We need to support working more aggressively and proactively with birth parents to help them learn ways to be more supportive and less rejecting.*

<u>Research D: Resilience—Importance of Positive Relationships</u>

Rodrigo Torres in a doctoral dissertation for DePaul University in 2012 focused on relational resilience in a qualitative analysis (research which focused on narratives and stories) focusing on gay, bisexual, and questioning male youth. Torres argues for a less deficit based framework when looking at how to more effectively work with the gay, bisexual, and questioning population. Relational resilience focuses on strengthening relationships rather than focusing on

increasing the individual's strengths or skills. Torres argues that connective, positive, and supportive relationships are key to resilience.

Torres, Rodrigo, 2011. In their own words: A qualitative analysis of relational resilience in the lives of Gay, Bisexual, and questioning male youth. Chicago. DePaul University, Paper 111.

- To what degree does this information/research/data surprise you?

  It is likely that participants will indicate they are aware of the importance of relationships, just as they are aware of the importance of family relationships. Participants may however be somewhat surprised at the notion that one works to promote and build relationships rather than focusing on what the person needs to change (or strengthen). It is a different paradigm and way of looking at how we intervene effectively.

- What implications does this information have for how we approach our work with LGBTQ youth and families?

  o This reinforces again how important it is for me as a foster/adoptive parent to establish positive and nurturing relationships with youth and their families.

  o This research indicates that identifying deficits and focusing on those deficits will not be as effective as working on relational issues.

  o Relational work would promote mentoring, helping the youth build positive friendships, connecting the youth to support groups and advocacy groups, intervening with the school to promote positive connections to teachers and school organizations, identifying potential long term resources for the youth, helping the youth reconnect to past supports or resources (such as previous foster/adoptive families, teachers, role models, or mentors).

  o It means my relationship with an LGBTQ has the potential to be life changing for the youth.

Research E: Resilience—Faith and Spirituality

Lease, Horn, and Noffsinger-Frazier (2005) note that faith experiences result in more positive feelings about self and better psychological health. Further, a report related to the aging LGBTQ population identified religious and spiritual activities as a key factor relating to positive mental and physical health.

Lease, Horne, Noffsinger-Frazier. Affirming faith experiences and psychological health for Caucasian lesbian, gay, and bi-sexual individuals. Journal of Counseling Psychology. 52(3). 2005.

Fredriksen-Goldsen et.al. Disparities and resilience among lesbian, gay, bi-sexual, and transgender older adults. Aging and Health Report.

- To what degree does this information/research/data surprise you?

  Participants may express some surprise because there is an assumption that churches and religious groups are not welcoming to the LGBTQ population in general, and that as a result many LGBTQ youth do not look for support from the religious community. This is certainly true in some situations—but as the research shows, not in all situations.

- What implications does this information have for how we approach our work with LGBTQ youth and families?

  o We cannot assume that an LGBTQ youth is not interested in church, religion, or spiritual quests.

  o We need to offer LGBTQ youth the opportunity to explore or experience their religion in any way they see fit.

  o We need to help LGBTQ youth locate churches or religious supports that will be accepting and supportive to the youth.

Research F: Risk—Bullying and Harassment at School

While trying to deal with all the challenges of being a teenager, gay/ lesbian/ bisexual/ transgender teens additionally have to deal with harassment, threats, and violence directed at them on a daily basis. They hear anti-gay slurs such as "homo", "faggot" and "sissy" about 26 times a day or once every 14 minutes.

Even more troubling, a study found that sixty percent of middle school LGBT youth had experienced physical harassment and more than a third were actually assaulted as a result of sexual orientation. Middle school students face more hostile environments than high school students, and may have fewer resources to help them. Most students do not report bullying or harassment. What makes this even more concerning is the more harassment a youth experiences, the greater the likelihood that he or she will engage in risky behaviors.

GLSEN. 2009. The experiences of lesbian, gay, bisexual and transgender middle school students (GLSEN Research Brief) New York: Gay, Lesbian and Straight Education Network.

Bontempo D.E. and D'Augelli. 2002. Effects of at-school victimization and sexual orientation on lesbian, gay, or bisexual youths' health risk behavior. Journal of Adolescent Health, 30, 364-374.

- To what degree does this information/research/data surprise you?

  This information may not be surprising to anyone as there is increased awareness about bullying in general. There have been several sensationalized media cases that have further highlighted the issue. The extent of and voracity of what LGBTQ youth experience on a day to day basis may resonate with some participants as this isn't related specifically to situations of bullying. Negative language is part of mainstream culture that is heard everyday and everywhere. Participants may not be aware there is research that clearly connects experiences of being bullied with the development of high risk behaviors.

- What implications does this information have for how we approach our work with LGBTQ youth and families?

  o We need to recognize that LGBTQ youth are likely being bullied and/or receiving constant negative messaging. This, coupled with ongoing family stressors and/or placement stressors places LGBTQ youth in the child welfare system at even greater risk.

  o Bullying and violence in the school setting also serves to re-traumatize youth who may already have experienced family abuse or neglect.

o There is a need for foster/adoptive parents to work with the school to ensure that LGBTQ youth feel safe in school and are connected to support systems within the school (such as LGBTQ clubs, empathic teachers or other role models, etc.).

o As foster/adoptive parents and kinship caregivers we need to better understand the risks an LGBTQ youth faces in the school setting.

Research G: Child Welfare Practice Risk--Multiple Placements

LGBTQ youth experience more placements, placement disruptions, and unstable placements in both the juvenile justice and child welfare systems. Mallon, Aledort, and Ferrera in 2002 documented 6.35 average number of placements for LGBTQ youth and asserted this was related to non-affirming placements where youth may not feel safe or accepted.

Mallon, G., Aledort, N. and Ferrera, M. 2002. There's no place like home: Achieving safety, permanency, and well-being for lesbian and gay adolescents in out-of-home care settings. Child Welfare 81(2): 407-439.

- To what degree does this information/research/data surprise you?

  Most participants will be aware that youth, and certainly LGBTQ youth, have difficulty achieving stable and permanent placements within the child welfare system. Participants may not have thought about how this relates to poor permanency planning outcomes or serves to re-traumatize youth over and over. This again highlights the need to work more to reunite LGBTQ youth with their families whenever possible.

- What implications does this information have for how we approach our work with LGBTQ youth and families?

  o Highlights the importance of reunification efforts with families whenever possible.

  o Clearly shows the need for ongoing training and support for foster/adoptive parents, kinship caregivers, and child welfare staff.

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- Highlights the need for trauma informed care as LGBTQ youth have experienced multiple moves and losses.

- The need for a youth driven permanency approach that is aggressively committed to the idea that LBGTQ youth deserve permanent nurturing families that there are families willing to make that commitment, and that independent living is not viewed as a viable permanent goal.

Summarize by noting that participants have identified many positive ideas for improving practice and that many of these ideas will be explored in greater depth as the day progresses.

Research A: Demographics
Between 5 and 10% of the general population is LGBT. It is likely that youth in out-of-home care in the child welfare system represent an even higher percentage. Mallon noted that child welfare workers often do not identify that they have LGBTQ youth on their caseloads, drawing concern that workers are not communicating with youth in a way that leads youth to be comfortable identifying as LGBTQ.

This estimate comes from the assumption that 5-10% of the general population is LGBT. John C. Gonsiorek and James D. Weinrich, "The Definition and Scope of Sexual Orientation," in Homosexuality: Research Implications for Public Policy (Newbury Park, CA: Sage Publications, 1991.) Courtney, Dworsky, Lee, and Raap (2009) found a much higher percentage of youth in foster care who identified as something other than fully heterosexual. Mid-west Evaluation Former Foster Youth.

Mallon, G.P. Let's Get this Straight: A Gay and Lesbian Affirming Approach to Child Welfare. New York: Columbia University Press. (2000)

Research B: Demographics and Homelessness
Existing literature documents that LGBTQ populations have been acknowledged to a greater extent by social services directed toward runaway and homeless youth than within child welfare settings. Many youth experiencing homelessness are living on the streets because they view it as safer or preferable to child welfare placements where they have experienced verbal or physical harassment and a lack of understanding. 52% of youth experiencing homelessness have had some involvement with the foster care system at some point in their lives.

Mallon, G. 1998. We don't exactly get the welcome wagon: The experiences of gay and lesbian adolescents in child welfare systems. New York: Columbia University Press.

Research C: Resilience—the Role of Family
The single most significant factor in predicting resilience and positive outcomes for LGBTQ youth is a family that is accepting and supportive of the youth. Caitlin Ryan, a social worker for the Family Acceptance Project at San Francisco State has managed this multi-year mixed methods study. Ryan also found that there are effective ways to work with families to help them modify rejecting behaviors and increase their level of support.   These efforts ultimately lead to strengthening families and helping LGBTQ youth to remain at home.

Ryan, Caitlin. 2010. Engaging families to support lesbian, gay, bisexual, and transgender youth: The Family Acceptance Project. Prevention and Researcher 17(4): 11-13.

Research D: Resilience—Importance of Positive Relationships
Rodrigo Torres in a doctoral dissertation for DePaul University in 2012 focused on relational resilience in a qualitative analysis focusing on gay, bisexual, and questioning male youth. Torres argues for a less deficit based framework when looking at how to more effectively work with the gay, bisexual, and questioning population. Relational resilience focuses on strengthening relationships rather than focusing on increasing the individual's strengths or skills. Torres argues that connective, positive, and supportive relationships are key to resilience.

Torres, Rodrigo, 2011. In their own words: A qualitative analysis of relational resilience in the lives of Gay, Bisexual, and questioning male youth. Chicago. DePaul University, Paper 111.

Research E: Resilience—Faith and Spirituality
Lease, Horn, and Noffsinger-Frazier (2005) note that faith experiences result in more positive feelings about self and better psychological health. Further, a report related to the aging LGBTQ population identified religious and spiritual activities as a key factor relating to positive mental and physical health.

Lease, Horne, Noffsinger-Frazier. Affirming faith experiences and psychological health for Caucasian lesbian, gay, and bi-sexual individuals. Journal of Counseling Psychology. 52(3). 2005.

Research F: Risk—Bullying and Harassment at School
While trying to deal with all the challenges of being a teenager, gay/ lesbian/ bisexual/ transgender teens additionally have to deal with harassment, threats, and violence directed at them on a daily basis. They hear anti-gay slurs such as "homo", "faggot" and "sissy" about 26 times a day or once every 14 minutes. Even more troubling, a study found that sixty percent of middle school LGBT youth had experienced physical harassment and more than a third were actually assaulted as a result of sexual orientation. Middle school students face more hostile environments than high school students, and may have fewer resources to help them. Most students do not report bullying or harassment. What makes this even more concerning is that harassment has been identified as a critical factor in predicting outcomes.   The more harassment a youth experiences, the greater the likelihood that he or she will engage in risky behaviors.

GLSEN. 2009. The experiences of lesbian, gay, bisexual and transgender middle school students (GLSEN Research Brief) New York: Gay, Lesbian and Straight Education Network.

Bontempo D.E. and D'Augelli. 2002. Effects of at-school victimization and sexual orientation on lesbian, gay, or bisexual youths' health risk behavior. Journal of Adolescent Health, 30, 364-374.

Research G: Child Welfare Practice Risk--Multiple Placements

LGBTQ youth experience more placements, placement disruptions, and unstable placements in both the juvenile justice and child welfare systems. Mallon, Aledort, and Ferrera in 2002 documented 6.35 average number of placement for LGBTQ youth and asserted that this was related to non-affirming placements where youth may not feel safe or accepted.

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MODULE THREE: PACKING MY SUITCASE

Time
60 minutes

Competency
Knows and understands personal, religious, and cultural views and values that influence foster parent perspectives on LGBTQ youth and families and be able to develop strategies that balance personal beliefs and professional responsibilities.

Objectives
- Clarify one's personal, religious, and cultural beliefs and values regarding sexual orientation, gender identity expression.
- Identify strategies for balancing personal views with professional responsibilities.
- Explain common myths and stereotypes of LGBTQ people/culture and understand accurate information regarding these myths/stereotypes.

Materials
- ✓ A large index card in front of each participant
- ✓ On one end (of the longest wall) hang a large sign that says "Very comfortable" and at the opposite end hang a sign that says "Not at all comfortable"
- ✓ Hang poster paper to set up four to six work stations along the walls of the room. Place 2 to 3 markers at each station. Ensure there is room for 4-6 participants to gather around the poster paper at each location.
- ✓ *Handout #4: Beliefs and Sources of Information*
- ✓ *Handout #5: Myth/Fact Sheet*
- ✓ *Handout #6: Packing and Unpacking my Suitcase*

Facilitator's Notes

☑**Introduce** this module by reviewing the competency and learning objectives with participants.

Introduce the idea that we all approach our "foster/adoptive parent journey" with a big suitcase full of wishes, hopes, values, feelings, fears, past experiences, beliefs, and dreams. Emphasize that the suitcase may be stuffed with all kinds of things, sometimes even conflicting things or ideas or beliefs that are still in process. Note that just like on any journey you may find that you brought some things that are no longer helpful or that are even holding you back, some things that are perfect, and other things you realize you just didn't bring enough along. Emphasize the importance of doing an inventory at each step of the way to ensure that you have what you need to get the most out of your journey.

Explain that in this session foster/adoptive parents and kinship caregivers will be engaging in some activities that will help them inventory what is in their suitcase so they might decide at this point in the journey what to throw out, what to set aside for use somewhere else, what to keep, what to grow, and what may need to be added.

Ask participants to approach these activities with the following in mind:

- This is not about being right or wrong, but rather about exploring your beliefs and values.

- The more honest you are with yourself and other foster/adoptive parents the more valuable these activities will be for you.

- Yes we are asking you to publicly share some of your beliefs and values because we want you to be able to learn and process your thinking with one another.

- These activities are about taking inventory—what are you carrying with you as you approach your work—are things weighting you down? Putting up barriers? Helping you along?

- Let's figure out what you might need to rearrange in your suitcase in order to do the best work that you can do.

Ask participants to take the large index card in front of them and to think about a stereotype or belief they may hold about LGBTQ people. Encourage participants to be very honest and emphasize they will not have to share what is written on the card. Ask that they put the card away until the end of the day.

Note that the first activity is one that will help participants consider some of their personal beliefs by looking at their level of comfort in responding to different types of situations.

Conduct the activity:

- Show participants the two signs on the wall saying "Very comfortable" and "Not at all comfortable."

- Explain that you will be reading a statement and you will ask participants to move along the line between the two signs as if it is a continuum. For example, if a participant is unsure or feels that there might be both comfortable and uncomfortable components in the situation, the participant would stand in the middle between the two signs.

- Ask participants to get out of their seats, stand in the vicinity of the continuum, and prepare to respond to the first statement.

- Read each of the statements and allow participants to adjust their position along the continuum. After participants have moved to their respective place on the continuum process each of the situations by asking two or three people to share why they have positioned themselves at that location.

Complete the activity using each of these statements:

- A 17 year old youth discloses their sexual identity to you
- You have been asked to consider foster/adoptive parenting an 11 year old who is questioning his sexual identity
- You discover that your church does not support LGBTQ identity

- Your minister/rabbi/priest/oman comes out as gay
- You attend a LGBTQ support group
- You find out that your child's teacher is openly lesbian
- You find out that your doctor is openly bisexual
- You have been asked to provide short term care for a youth who is transgender and is transitioning from female to male
- Your best friend comes out as transgender
- You need to discuss a youth's sexual identity with the child welfare worker

Facilitate a discussion to help participants process the activity by asking the following questions.

Note to facilitator: *If the group is relatively small you can conduct this part of the training as an open discussion (which is preferable). If the group is large (more than 20) break into small groups so that participants have an opportunity to discuss the activity. However, actively move among the small groups to assist in guiding discussions. There may be strong reactions to the activity. It is important to reinforce honesty. (No one wants a foster/adoptive parent to say they are comfortable caring for a transgender youth if that is not the case. On the other hand discussing one's concerns can help one become more comfortable.) Encourage open respectful conversations.*

- What were your key learning points from this activity?

Responses are likely to include:

We all have different responses to various situations but in our professional foster/adoptive parent role we need to be aware of these responses.

My reactions varied to the different scenarios. I will need to think about these reactions in terms of providing care to youth.

- What did you learn about yourself that surprised you?

    Responses are likely to include:

    I am more open-minded (or close-minded) than I originally thought.

I have stronger reactions than I felt I would.

- Why is this activity important to the work that you do?

  Responses are likely to include:

  We need to know what our limitations are—the types of situations that we know we can't handle well.

  It makes us consider closely the attitudes or beliefs we have that might interfere with good care.

Summarize by noting the activity demonstrated everyone has a different level of comfort--life experiences, culture, family, friends, religion, work, and exposure to diversity may all have an impact on what you consider your "comfort zone". Note however that as professional foster/adoptive parents we may be called to get beyond what always feels comfortable as we have a responsibility to work with all types of people and all types of situations.

Ask participants what they can do when their personal feelings and beliefs interfere with their ability to work with all types of people, in this situation, with LGBTQ youth.

  Encourage discussion that brings out the following points:

- I may not agree with everything I am asked to do in my professional role of foster/adoptive parent. Regardless of what your professional job is there may be conflicting feelings.

- If the personal beliefs literally interfere with your ability to provide good care to an LGBTQ youth you need to explore these feelings and identify this ahead of time with the agency. While we want to educate you and possibly expand your zone of comfortability, we only want families who can provide affirming and accepting care to LGBTQ youth and to any youth.

- Attending trainings, such as this, may be helpful in getting your personal feelings in closer alignment with the professional

expectations. Just learning the facts about how LGBTQ youth are at greater risk because of lack of foster/adoptive homes and supportive adults encourages me to re-explore my personal beliefs.

Explain that gaining information is an important part of helping realign personal beliefs with professional expectations. Note the next activity will explore myths and stereotypes about LGBTQ people. Note there are a number of common myths such as:

- Gay couples identify one person as the "man" and one as the "woman"
- Gay men are usually florists or decorators
- Lesbians hate men
- You can tell if someone is gay or not by looking at them

Refer participants to *Handout: Beliefs and Sources of Information* and instruct participants to work individually to complete the handout. Note they are being asked to make a list of beliefs they may hold now or beliefs they held in the past, and to identify how they developed these beliefs or who provided the information or encouragement for them to develop these beliefs. Tell participants they have 10 minutes to complete their list. Call time after 10 minutes.

Divide participants into four to six small groups and assign the groups to the various work stations that are set up about the room. Instruct the groups to record all of their responses on the poster page on the wall. Note that if a stereotype or myth is identified by multiple people to write it only once but to put check marks to identify the number of people. Call time when it appears the groups are completing their task.

Ask each group to rotate clockwise (or to the right) to the neighboring work station. Ask that they take a few minutes to review the responses at this work station, compare the responses with their own, and make any additions. After a couple of minutes ask that each group rotate again to the next workstation. Do this until each group has visited each work station.

Reconvene the large group and conduct a large group discussion about misconceptions and truths in relation to LGBTQ people. Ask the following questions:

- How much similarity was there between the lists?

  Ensure that the following is covered in the discussion:

  - There was quite a bit of repetition in the lists. This points to how prevalent stereotypes may exist within our culture and in fact how stereotypes even become self-perpetuating. People repeat them as if they are fact. Stereotypes may become so accepted it is difficult for people to challenge them or to identify that they are not based in fact.

- Why are stereotypes damaging?

  Ensure that the following is covered in the discussion:

  - Stereotypes take away individuality and seek to impose qualities across an entire group of people. Even characteristics that could be perceived as positive (such as "gay men are artistic") impose a quality that may or may not be true. But many stereotypes are negative or tend to limit possibilities or can be used as a means to be dismissive. Some stereotypes are viewed through a comedic lens, and people enjoy laughing at jokes that stereotype the LGBTQ community. All of these tend to diminish the totality of a person or a group's identity. Unfortunately it doesn't end there. As we diminish a certain group, and hold our own selves in higher esteem, it gives license to treat this group as less than ourselves. This is very dangerous thinking that easily leads to discrimination, bullying, and violence and/or of passively accepting these behaviors in others.

- Why are stereotypes damaging to our child welfare work within the LGBTQ community?

  Ensure that the following is covered in the discussion:

  - Our work with children and families is based on relationship. Through positive relationships we hope to engage, guide, mentor, and motivate. When we hold onto myths and stereotypes about

people we cannot engage in an authentic relationship. Stereotypes limit how we see people and how we view their possibilities. Further, stereotypic views can generally be detected thus interfering with any potential to build trust. On a much more concrete level, stereotyping can simply lead you to make wrong decisions or take wrong actions. For example, if you believe that you can tell someone is gay by how they look or talk, you will inevitably make a mistake.

- What were the most common sources of information?

    o Parents, siblings, extended family, friends, peers, neighbors, church members, co-workers were all identified. Unfortunately stereotyping is very common so most people can cite more than one person that has contributed to the development of myths and stereotypes. In fact, some myths and stereotypes are so common that they make their way into the media, books, magazine, television shows, and movies. This layering of information, especially if it begins with people very significant to us (family member), and is reinforced by others, and is further reinforce through media representations, can lead to the development of very strong beliefs. When our lifestyle prevents us from associating with members of the LGBTQ community or openness to hearing their voices, there may be little opportunity to obtain more accurate representations or develop any greater understanding of LGBTQ issues.

Note to facilitator: *A participant may identify a personal experience that contributed to the development of a stereotype--for example, having a close friendship with a gay male who was very effeminate and sensitive which led to an overall belief that this is descriptive of all gay men. In this situation validate the person's experience but discuss how false it is to take an experience with one person as being representative of the entire population of gay males.*

Note that LGBTQ persons may not only deal with LGBTQ myths and stereotypes, but potentially with myths and stereotypes related to other aspects of their identity.

- Stereotypes and myths play out across many levels of identity—a person's ethnicity, religion, where one lives, the profession in which one works etc.
- In fact, it is actually another stereotype that LGBTQ persons are dealing fully with LGBTQ issues at all times. In fact, LGBTQ persons—like everyone else-- have many facets to their lives including their race, ethnicity, age, special interests, etc.—and each of these facets may also be open to stereotypes and myths.
- When one stereotype unites with another stereotype it can make perceptions of the LGBTQ person even more distorted and potentially negative.

*Note to facilitator: Use examples that are most related to the populations you serve such as:

- What if you are a Lesbian (with inherent stereotyping about being "strong, man-hating, aggressive") living in Iowa (with inherent stereotyping that hard-working Iowa women are "sweet and demure")?

- What if you are a gay man (with inherent stereotyping about being "effeminate and sensitive") employed as an ironworker (with inherent stereotyping as being "rough and tough")?

- What if you are an Italian Catholic male (with inherent stereotyping related to "traditional, dominant, strong") who is also transgender (with inherent stereotyping of feminine characteristics as well as total misunderstanding of what transgender means)?

Emphasize that identity is complicated, and that overlays of stereotyping and myths about identity can make understanding one another and who we are very challenging—but critical in our work as child welfare professionals.

Distribute *Handout: Myth/Fact Sheet* review. Ask participants for reaction or comments as you highlight each of the myths.

About youth:

Myth: Adolescents are too young to know that they are LGBT.

Fact: Research has consistently shown that the average age of awareness of LGBT identity is 10 years of age; the average age of disclosure is 14.
(D'Augelli, A., Grossman, A. and Starks, M. "Parents Awareness of Lesbian, Gay and Bisexual Youth's Sexual Orientation", Journal of Marriage and Family, May 2005.)

Myth: LGBT youth must be separated from the general population to ensure their safety.
Fact: Isolation and separation only serve to punish LGBT youth. The safety of youth in out-of-home care is best ensured by adequate staffing, training, and meaningful programming.
(Model Standards Project: Creating Inclusive Systems for LGBT Youth in Out-of Home Care. Child Welfare League of America, 2005.)

Myth: Providing youth with information about LGBTQ identity, exposing youth to LGBTQ role models, or promoting interaction with LGBTQ peers might falsely convince a youth that he or she is LGBTQ.
Myth: Sexual abuse may lead to the child identifying as LGBT.
Myth: Youth have control over their sexual identity and orientation and can choose not to be LGBT.
Fact: The American Psychological Association acknowledges that the exact cause of sexual identity and orientation has not been identified but the APA concludes that most people "experience little or no sense of choice about their sexual orientation." Knowing gay people, being exposed to information about LGBTQ issues, being sexually abused or any number of other supposedly causative factors has no basis in research.

About adults:

Myth: Gay men molest children at higher rates than heterosexuals.

Fact: In a study by Jenny, Rosier, & Payer (1994), researchers reviewed the medical charts of 352 children evaluated for sexual abuse in a Denver children's hospital. In 74 cases, the abuser was another child or adolescent, none of whom were identified as lesbian or gay. In 9 cases, the abuser could not be identified (e.g., each parent accused the other). In 269 cases, the child (219 girls & 50 boys) was abused by an adult. Both girls and boys were most likely to be abused by their fathers, stepfathers, or other men married to female relatives. Only 2 of these 269 abusers (less than 1%) were identified as gay or lesbian. The researchers concluded

"most child abuse appears to be committed by situational child abusers who present themselves as heterosexuals" (p. 43).

Myth: Having LGBT parents negatively impacts children's adjustment.

Fact: The research does not show that children of LGBT parents are negatively impacted by the parents' sexual identity or orientation. Cambridge Psychologist Dr. Michael Lamb, a leading researcher on child development, summarized over 40 years of research noting that other factors have much greater impact on the child's development. The US National Longitudinal Lesbian Family Study has shown that children of Lesbian parents are Justas happy as children of not LGBT parents. Finally Dr. Charlotte Patterson of the University of Virginia has document that adopted children of same-sex couples were well adjusted.

Explain that understanding how beliefs are instilled and perpetuated is very important if we are going to help create better informed supports and environments for our LGBTQ youth and families.

⌂**Refer** participants to *Handout: Packing and Unpacking My Suitca*se and conduct an activity to bring together the learning in this module. Explain that participants are asked to reflect on the discussion, presentation, and activities during the past hour and respond to the three questions:

- What beliefs, ideas, or personal qualities do you want to remove from your suitcase at this point?

- What beliefs, ideas, or personal qualities do you want to "grow" or bring more along?

- What new beliefs, ideas, or personal qualities do you want to pack for the journey?

⌂**Ask** if there is anyone who wants to quickly share:

- Something they are taking out of their suitcase?
- Something they are going to increase or try to bring more along?

- Something new they are going to put in their suitcase?

Thank foster/adoptive parents and kinship caregivers for their participation and willingness to look closely at their values and beliefs; and note that the next module will focus on helping participants better understand terminology related to LGBTQ issues.

MODULE FOUR: TALKING THE TALK

Time
35 minutes

Competency
Knows and understands the differences in terminology associated with sexual orientation, sex, and gender and can integrate and apply this information for conversations with youth and families.

Objectives
- Explain the differences between sexual orientation, sex, and gender
- Increase competency in using accurate and culturally appropriate terminology.

Materials
- ✓ Prepared easel pad pages
  TERMS

  Gay/Lesbian
     Gender identity expression/Gender Role
     Sexual Orientation/Sexual Behavior
     Transgender/Transsexual/Transvestite
     Heterosexuality/Homosexuality
     Bisexual/Questioning
     Coming Out/Disclosure/Being Out/In the Closet/Being Found Out
     Rainbow Flag/ Pink Triangle/Black Triangle/Stonewall

Handout #7: Definitions of LGBTQ Terms

- ✓ Place a large index card in front of each participant (if there are more than 22 participants two people may share one word) with each of the terms above (Gay, Lesbian, Gender identity expression, Gender Role, Sexual Orientation, Sexual Behavior, Transgender etc.)

▣**Introduce** this module by reviewing the competency and learning objectives with participants.

Note that foster/adoptive parents, kinship caregivers, and people in general are likely to be confused with some of the terminology related to the LGBTQ community, and may feel intimidated or concerned about proper usage of language. Note that if participants feel this way it is actually good—because proper use of terminology is important.

Ask participants why they think the proper use of terminology and language is important in our child welfare work with LGBTQ youth and their families.

Ensure the following is covered:

- Terminology is part of the knowledge base that we need to have about the LGBTQ community so that we can communicate with LGBTQ youth, their families, and other professionals with a shared understanding;

- Language can be symbolic of your respect and concern for LGBTQ persons;

- Improper use of terminology quickly identifies you as a person who is not knowledgeable about LGBTQ issues;

- Some language may be viewed as derogatory.

Note that language is ever changing and usage may vary according to geography, age, socioeconomic status, and cultural background.

Conduct an activity designed to help participants learn how to correctly use terminology that relates to the LGBTQ community; and to get comfortable using the terms when talking with others.

- Go to the prepared easel pad page entitled TERMS and read out the different grouping of terms.

- Ask participants to pick up the index card that sits in front of them and to move about the room and search for their partner or partners; then proceed to pick up an easel pad page/markers from the front of the room and find a space to work together. (The groups will vary in size from 2 to 5)

- Explain that the purpose of the module is for them to explore what they think the terms mean and how they would describe or define the terms.

- Instruct them to write their pair or grouping of terms at the top of the page and record the different ideas on the easel pad page.

- Instruct participants NOT to use the Handout in their Participant Notebooks, as it provides definitions for the words.

- Give a time warning after 5 minutes and then allow another 2-3 minutes.

Process the module by asking someone from each group to report back by sharing their definitions and ideas, as well as sharing what the experience was like for them in trying to define the terms. Allow others to add thoughts or ideas. At this time do not comment or edit the responses.

Refer participants to *Handout: Definitions of LGBTQ Terms.*

- Ask each group to now look up the definitions on the handout, compare the definition to what is on the handout, and note any differences or similarities.

- Call time after 2-3 minutes.

- Ask each group to report back their findings.

- Facilitate discussion among participants regarding the definitions and the use of different terms.

Note to Facilitator: *Most likely there will be some groups that were not able to provide accurate working definitions of the terms. Be encouraging to participants, noting that the purpose of the training is to help them as they struggle with exploring the meanings and also as they begin to use the words out loud in communicating with one another. Emphasize that this is the reason they were asked to work on the definitions in the small groups as opposed to simply giving them the handout. Note that the exploration process will also help them to better remember the definitions and meaning.*

Note that this list is not all inclusive and within different cultures and subcultures there may be other terms that are utilized. Encourage an open discussion on other terms the group may have heard, but be sure to have participants consider if these terms may carry negative connotations. Cover the following points:

- There are a number of words that may be used within certain parts of the LGBTQ community as part of a political statement to redefine words previously used with negative connotation. (Examples include words such as dyke, faggot, queer). When these terms are used outside the "in-group" they would likely be seen as very negative or even as hate terms.

- The terms discussed provide a good starting point for being able to use respectful and accurate language. But continue the learning process. Initiate dialogue with your LGBTQ community, talk with service providers who work with LGBTQ clients, and open up your mind and ears to learn about the LGBTQ issues within your community.

- Generally speaking if you approach LGBTQ youth with respect and acceptance they will likely be willing to help you and will be forgiving if you use a term incorrectly. It is better to ask honest questions than to be disingenuous. At the same time it is not the responsibility of LGBTQ youth to train you. You need to have a good working knowledge, which is the process we worked on today.

Ask participants if there are any further questions or comments.

MODULE FIVE: AFFIRMING ENGAGEMENT WITH LGBTQ YOUTH

Time
70 minutes

Competency: Knows and understands effective engagement strategies to care for LGBTQ youth in your home.

Objectives
- Describe components of the foster/adoptive parent role in caring for LGBTQ youth
- Know ways to create a welcoming home for LGBTQ youth
- Describe strategies for affirming LGBTQ identity

Materials
- ✓ Digital Story: Jimmy (You may access this digital story at the web site of the National resource Center for Permanency and Family Connections at http://www.nrcpfc.org/digital_stories/YP_John_J/index.htm)
- ✓ Handout #8: My Role in Working with LGBTQ Youth
- ✓ Handout #9: A Safe and Affirming Family
- ✓ Handout #10: Promoting Safety and Well-Being for LGBTQ Youth in Care
- ✓ Handout #11: What to Say, What to Do (Engagement)

Four to six prepared work stations (with room for 4-6 participants at each station) with a prepared easel pad page with the graphic reproduced from *Handout: A Safe and Affirming Family.* Each workstation should have available: Assorted colors of magic markers, small rainbow and triangle symbols (stickers or downloaded from internet and cut out), glue or tape.

☑**Introduce** this module by reviewing the competency and learning objectives with participants.

Note that this module deals with relationship building with LGBTQ youth. As we have discussed our LGBTQ youth need acceptance and support.

Introduce *Digital Story: Jimmy* for participants. Ask that as they watch the digital story they consider what steps were made or could have been made to be more affirming to Jimmy; and how child welfare professionals were supportive or could have been supportive.

Process the digital story by asking for reactions, and identifying what was done or could have been done by child welfare professionals to support the youth.

Explain that throughout the next training modules the group will be exploring specific skills in working with LGBTQ youth and their families. The modules will include presentations and then an opportunity to "try out the skill" through a series of fast paced activities called "What to Say, What to Do".

Note that the first area participants will be looking at is the role of the role of the foster/adoptive parent in working with LGBTQ youth as resource families are often confused about their role in working with youth who identify as LGBTQ.

Refer participants to *Handout: My Role in Working with LGBTQ Youth*. Ask participants to complete the survey indicating the degree to which they think the different activities reflect the role of the caregiver of an LGBTQ youth. Call time as participants begin to finish.

Ask for volunteers to share their responses and direct a large group discussion about why they responded the way they did. The following notes will help you direct the discussion and give back up resources and research to support best practice.

*(*The discussion notes are based on *Serving LGBTQ Youth in Out-of-Home Care: Best Practices Guide* by Wilber, S., Ryan, C., and Marksamer, J. Child Welfare League of America, 2006 and Mallon, G.P. *LGBTQ Youth Issues: A Practical Guide for Youth Workers Serving Lesbian, Gay, Bisexual, Transgender, and Questioning Youth*. Child Welare League of America, 2010.)

- I need to ask the youth if the youth identifies as LGBTQ.

Discussion Notes: Generally speaking it is not seen as the best course of action to ask youth directly if they identify as LGBTQ. Many youth will be reluctant to discuss the issue, especially if you do not have a relationship or a sense of trust that has been built. Some youth may fear being "outed" and your question could be viewed as a confrontation.The best course of action is to develop a positive and accepting relationship that helps the youth to feel safe to disclose information about themselves as they are ready to do so. Further, you don't necessarily know who identifies as LGBTQ. If a youth is giving you indication that he or she wants to explore the topic then it might be appropriate.

- I need to encourage the youth to disclose their LGBTQ identity to me so I can help them get the services and they need.

Discussion Notes: You can offer support to youth regardless of knowing their sexual identity or orientation. LGBTQ youth have many aspects to their identity and may have a range of issues. Youth served in the child welfare system are likely to come to our attention because they have had a range of losses, trauma, and/or unmet needs. It is important to look at the range of needs presented. While LGBTQ issues may have heightened the stress of both the youth and the family, there is no doubt that these families may also have a range of issues not solely related to LGBTQ issues such as substance abuse, mental health needs, employment needs, etc. As you work to address the youth's needs you can develop a positive relationship with the youth. Through this relationship the youth may at some point disclose their LGBTQ identity or issues to you. Do not totally focus on LGBTQ issues or define the youth entirely in terms of sexual orientation. On the other hand, present yourself as a person who is open and comfortable addressing all types of issues including gender/sexual orientation.

- If the youth discusses LGBTQ identity with me, I need to encourage the youth to tell the caseworker, family, and friends.

Discussion Notes: If the youth discloses LGBTQ identity with you it represents a level of trust. Your best response is to continue to engage the youth in sorting out feelings and concerns and helping the youth develop a plan of action that is comfortable for the youth. While you may want the youth to disclose or feel that the caseworker or family may already know or think that the issues need to be addressed—*this is not about you*. There may be steps to take to help the youth begin to feel more comfortable, and it **is** appropriate to encourage the youth to take these steps. For example, you can suggest that the youth attend a meeting of the Gay Straight Alliance at school, explore a website such as queerattitude.com (which is a well moderated online community that addresses "coming out" and other LGBTQ issues), or

seek to find a LGBTQ mentor to talk with the youth. (You may also include local resources in your community here.) You can ask the youth how you might be helpful in working with the caseworker, family or with friends. For safety reasons it is important to trust the instincts of youth who do not wish to disclose to their families. Further, school bullying statistics clearly indicate the risks a youth may take if they disclose to friends at school.

- If the youth discusses LGBTQ identity with me, I need to talk to the caseworker about referring the youth to therapy.

Discussion Notes: Identifying as LGBTQ is not in and of itself an indicator of a mental health need, diagnosis, or concern. However, we have already discussed how isolation, bullying, fear, and lack of acceptance can certainly contribute to a lack of self esteem and overall feelings of depression. Thus again it is critical to listen to the youth. If the youth is clearly in distress, having overwhelming fears and anxieties, and already dealing with family and societal rejection it is certainly appropriate to talk with the youth about what supports might be most helpful. It would probably be most helpful to offer an array of supports rather than focusing solely on therapy which can carry a connotation that "something is wrong" with the youth. If you do think the youth needs therapy you need to talk with the caseworker about a referral to a therapist who utilizes a positive youth development approach and is able to be affirming around LGBTQ issues. Obviously if a youth is having suicidal thoughts appropriate mental health services need to be put into place including an immediate evaluation.

- If the youth discusses LGBTQ identity with me, I need to discuss this with the child welfare team.

Discussion Notes: Information related to sexual identity and orientation needs to be handled as confidential information. The "child welfare team" may be a wide array of people including school, volunteers, paraprofessionals, legal staff, and service providers. It is not appropriate to discuss LGBTQ issues in this forum without the youth's permission. It is appropriate to discuss this with the caseworker (or your Family Resource Worker). However, even this needs to be discussed with the youth. You may have to help the youth understand why the caseworker needs to know and explain that the caseworker has a responsibility to keep the information confidential.

- If the youth discusses LGBTQ identity with me, I need to evaluate the youth's safety.

Discussion Notes: This is absolutely true. LGBTQ youth are definitely at greater risk for many reasons. It is important to discuss safety in all aspects of the youth's life. As noted earlier LGBTQ youth are targeted for violence and bullying at school, on the bus, on social networks, and in the community. You have a role to assess the youth's sense of safety at school and work with the school to ensure a safe environment. Youth in foster/adoptive care are often bullied by other children/youth in the home. LGBTQ youth may experience abuse or conflict with their families that places them at risk. You may need to help prepare the youth for visits and ensure the youth feels safe during visits. You have a critical role in continual assessment of safety issues that may impact the LGBTQ youth.

Summarize the discussion by emphasizing the importance of building a relationship and working with the LGBTQ youth to identify their needs.

Explain that one of the most helpful things a foster/adoptive parent can do is to provide a welcoming and accepting environment for all youth.

Note that foster/adoptive parents may or may not know that a youth is LGBTQ at the time of placement so it is important that foster/adoptive families accept their role knowing that an LGBTQ youth could be placed in their home. Ask foster/adoptive parents to share any experiences with knowing or not knowing and how their family handled the situation.

Deepen the discussion by recognizing the challenge that foster/adoptive families face when they take youth into their homes when they may or may not have adequate or accurate information about the youth. Clarify that sometimes the youth may not have disclosed that they are LGBTQ or a young child may be placed before coming to full awareness of being LGBT. Note that generally caseworkers will tell foster/adoptive parents if they are aware that the youth is LGBTQ, however sometimes the youth discloses to the caseworker and may need time to make a plan with the worker regarding how to tell the foster/adoptive parent.

Ask participants for a couple of ideas for how they might make their home feel safe and accepting for a youth who identifies as LGBTQ youth or for a youth who has not yet identified as LGBTQ or for any youth. (Do not make a long list as the next activity is designed to help participants think more extensively about the question. The question is asked here to help ellicit a couple of examples prior to the activity.)

    Encourage the following type of response:

- Display the rainbow flag or pink triangle in a place that is visible

- Seek to use gender neutral language
- Verbally state to the youth that you are accepting of all types of diversity including sexual orientation and identity

Explain that the next activity is designed to help participants think in greater detail about all the different ways that they can promote a safe, accepting, and affirming environment for youth.

⊡**Refer** participants to *Handout: A Safe and Affirming Family* and show participants the prepared easel pad page (with the same graphic as the handout). Note that in this activity participants will be challenged to design a supportive home environment. Note that there are many different ways that our families and our homes reflect a sense of being welcoming and accepting. Explain that in this activity we will be looking at five different areas:

- What type of culture will you promote in the home? When we think of culture we think of important values and beliefs and ways of interacting. What type of culture will make LGBTQ youth feel safe and accepted?

- What signs of welcome do you show in your home? When we think of welcome signs we sometimes think of the pineapple. But what signs might make an LGBTQ youth feel welcome and accepted?

- What house rules do you have in your home? Good rules help family members feel safe and respected. What rules might help an LGBTQ youth feel safe and accepted?

- What books might you have on the shelf, magazines on the table, DVDs for viewing, or pictures on the wall? All of these are concrete signs of how accepting you are of diversity. What books, magazine, DVDs, or art work might help an LGBTQ youth feel a sense of acceptance and affirmation?

- Finally, what will you as a caregiver model in your home on a daily basis? You are the greatest tool for affirming LGBTQ identity. We know that LGBTQ desperately want to feel accepted and connected to families. What can you intentionally role model to help an LGBTQ youth feel acceptance?

Note that each of the work stations has the prepared easel pad page, as well as markers and stickers and other items to assist them in building a welcoming an affirming home.

- Divide participants into small groups and direct them to the workstations set up in the room (or to a table where you dsitribute the prepared easel pad page and materials.)
- Note that participants can take notes or record their group's ideas on *Handout: A Safe and Affirming Foster Family*.
- Tell them they will have 20 minutes to design their welcoming and affirming home. Encourage discussion and creative exploration.
- Ask participants to rotate around to view all the different works of the groups.

Use the following to assist you in helping the groups or in processing the activity:

- What type of culture will make LGBTQ youth feel safe and accepted?

  Encourage groups to talk about building a culture in their home that promotes such qualities as acceptance, appreciation of diversity, respect for others, openness to differences, a Christian culture of caring for everyone, and equality.

- What signs might make an LGBTQ youth feel welcome and accepted?

  Encourage groups to discuss putting up the rainbow signs, or the pink triangle as symbols of LGBTQ acceptance.

- What rules might help an LGBTQ youth feel safe and accepted?

  Encourage groups to establish home rules that address issues such as the need to respect everyone, no bullying, no making fun of others, no use of derogatory language to describe others, and rules regarding safety.

- What books, magazine, DVDs, or art work might help an LGBTQ youth feel a sense of acceptance and affirmation?

  Participants may not be familiar with specific ideas in this category. If this is the case encourage them to explore options on the internet. There are many excellent books and authors that focus on LGBT young adults and coming of age. Some of the well reviewed include books by Alex Sanchez (The Rainbow Trilogy), Jane Summer's "Not the Only One", Brian Katcher's "Almost Perfect", and Dale Peck's "Sprout". Steve Berman has an excellent book of inspirational stories/essays called "Speaking Out: LGBTQ Youth Stand Up." You can download articles and blogs from the web. "FosterClub" also has good articles and sometimes slogans/posters for download on the web. There are many LGBTQ musicians and artists. You can google the topic and come up with a variety of ideas.

- What can you intentionally role model to help an LGBTQ youth feel acceptance?

  Encourage participants to discuss that they will model affirming LGBTQ identity and orientation, will not tolerate bullying and discrimination, will address derogatory remarks, will demonstrate an appreciation of all types of diversity, will speak up when others make negative comments or jokes about LGBTQ issues, etc

Refer participants to *Handout: Promoting Safety and Well-Being for LGBTQ Youth in Foster Care* and note that some of these ideas were identified in the activity the participants just completed. Review part of the resource that were not addressed in the activity.

> Participate in training and preparation so as to be knowledgeable about the needs of LGBTQ youth in care.
>
> Explore with my family how we might react if we found out a youth in our care was LGBTQ or that a youth who identifies as LGBTQ is going to be placed in our home.
>
> Review the information regarding how LGBTQ youth are at risk with my family so that we have a better understanding of the challenges LGBTQ youth face. (You may choose to share some of the handouts from this training with your family members and with other foster/adoptive families.)
>
> Ensure that my family understands that sexual orientation and gender identity expression are not a choice, that they cannot be changed, and that any type of aversion therapy to change sexual orientation or gender identity expression is not allowed.
>
> Identify specific ways we can help make our home welcoming to an LGBTQ youth, such as:
> - Make it clear that jokes or slurs based on gender, gender identity expression, or sexual orientation are not tolerated.
> - Display pink triangles or the rainbow flag as a way to indicate an LGBTQ environment.
> - Accept self-expression through choices of clothing, jewelry, hairstyle, and room decoration.
> - Accept friends who may also be LGBTQ.
> - Seek to use gender neutral language.
> - Celebrate LGBTQ diversity in all forms and point to celebrities and role models who demonstrate bravery in the face of social stigma.

Understand the importance of role modeling respect for differences and affirmation of LGBTQ identity at all times.

Know that the youth needs to identify his or her own plan for "coming out."

Learn about LGBTQ resources and encourage youth to connect to these resources.

Continually monitor the youth's safety in the community, and especially in the school where bullying and harassment may take place.

Be an advocate for the youth in the schools and in the community

Refer participants to *Handout: What to Say? What to Do? (Engagement)* and note that we also need to be able to think of how we use language and driectly respond to youth in a way that is positive and affirming.

- Tell participants this activity will provide an opportunity to think about ways to talk with youth that will promote positive engagement and be viewed as affirming to the youth's identity.

- Explain that they will take each statement and identify potential responses.

- Divide participants into groups of three.

- Ask participants to work quickly as in real life there will not be a lot of time to think through the response and the activity is designed to help prepare participants to think quickly on their feet.

- Note they will have 8 to 10 minutes to complete the activity.

Process the activity using the following notes:

AHMID (age 14): I don't really like to talk to foster parents. I mean I'm just sick of it. No one knows what my life is like. It's just senseless. No one gets it.

Possible responses:
- *You're right that no one else knows exactly what you are going through. But I try to be open and listen.*

- *You know Ahmid, I have worked with all kinds of kids in a lot of situations. I may have worked with someone before who is going through some of the things you are going through.*

Learning point:
You want to indicate an openness and willingness to listen to the youth, while not directly confronting the fact that the youth is saying they do not want to talk with you.

MICHELE (age 16): I had a bad time this weekend. I hate break-ups. I'm pretty miserable.

Possible responses:
- *I'm sorry to hear that. Do you want to tell me about it?*
- *It is hard when relationships don't work out.*

Learning Point: Do not use heterocentric language. By remaining open and validating the feelings, you may invite more conversation.

BREANNA (age 15): Wow, I see you're into this rainbow thing. You a homo or something?

Possible responses:
- *Well I am into the rainbow thing. It's a symbol that means I am an adult who is supportive of lesbian, gay, bi-sexual, transgender, and questioning youth.*
- *If you look around you'll see we have a lot of symbols in our home. We want everyone to know that they're welcome here.*

Learning point: Symbols are an ideal way to generate discussion. This provides a great opportunity to directly state support for LGBTQ youth.

YOU walk into the room as Bryan (age 13) is holding a book from your shelf entitled "Queer: The Ultimate LGBTQ Guide for Teens". He is very embarrassed and tries to hide the book.

Possible responses:
- *Oh you found one of my books that I have in here for kids to read.*
- *Bryan, lots of kids your age are curious about sex and sexual orientation. Do you want to borrow my book?*

Learning point: This provides a great opportunity to model acceptance and encourage exploration. Directly asking Bryan at this point if he is LGBTQ will likely not be effective as he is already embarrassed. By treating the situation matter-

of-factly you are demonstrating that this is not going to shock you or upset you. Hopefully Bryan will see that you have experience working with LGBTQ youth.

RAVINA (age 15): I just feel different. From other girls. You know. Like I just don't want a boyfriend. It grosses me out to think about it.

Possible responses:
- I know it doesn't feel good to feel different. But do you think all girls want boyfriends?
- Not all girls want to have boyfriends.

Learning point: This type of statement gives you the opportunity to provide clarification and information.

GEO (age 16): I saw this weird thing on TV about this guy that wanted to wear his mother's clothes. Weird stuff.

Possible responses:
- *Well, I'm not sure it's that weird. I mean, this happens Geo.*
- *Sounds like an interesting show. Why do you call it weird?*

Learning point: This statement also gives you the opportunity to provide some clarification. By treating the situation matter-of-factly and questioning the "weird" aspect you are demonstrating an openness that perhaps will lead to further discussion.

VONDA (age 14): My last foster home there was a kid there that was a Lesbian. It totally freaked me out.

Possible Responses:
- Lots of kids identify as Lesbians or gay or bi-sexual or transgendered. Why were you freaked out?
- I have had a couple of girls living here who were Lesbian. I don't know why that would freak you out.

Learning point: A positive response portrays your openness about someone who identifies as Lesbian, hopefully encouraging further conversation.

Summarize the activity by emphasizing the need to approach all youth with a sense of openness and acceptance, and by modeling a positive attitude toward LGBTQ issues.

Note that in the next module the group will look at some of the day to day issues that may arise in providing care for LGBTQ youth.

MODULE SIX: NUTS AND BOLTS

Time
1 hour 15 minutes

Competency
Knows how to manage day to day issues that arise in the foster/adoptive home when caring for LGBTQ youth

Objectives:

- Describe ways to ensure appropriate rules and boundaries to ensure safety within the home
- Describe how to ensure safety related to sleeping arrangements
- Describe how to establish appropriate expectations regarding LGBTQ romantic and sexual relationships

Materials
- ✓ Handout #12: Let's Get Real
- ✓ Handout #13: Addressing safety Concerns--Sleeping Arrangements
- ✓ Handout #14: Strategies, Boundaries, and Rules to Promote Safety
- ✓ Handout #15: What to Say, What to Do (Safety)
- ✓ Handout #16: What to Say, What to Do (Supporting Healthy Sexual Development

- ✓ Place a small index card at each seat

Preparation for this module

It is recommended that the facilitator(s) read and become familiar with the publications listed below. It is likely that a range of questions may come up during this module. Every possible question could not be covered in this curriculum. These publications would provide the facilitator with a more in-depth understanding of best practices related to providing care for LGBTQ youth. Each of these may be downloaded at no charge on the web:

A Place of Respect: A Guide for Group Care Facilities Serving Transgender and Gender non-Conforming Youth. Sylvia Rivera Law Project. Spring 2011.
http://www.umass.edu/stonewall/uploads/listWidget/25133/A_Place_Of_Respect.pdf

Recommended Practices: To Promote the Safety and Well-being of Lesbian, Gay, Bisexual, transgender, and Questioning and Youth at Risk of or Living with HIV in Child Welfare Settings. Child Welfare League of America. 2012. http://www.lambdalegal.org/sites/default/files/publications/downloads/recommended-practices-youth.pdf

Getting Down to Basics: Foster Parents Caring for LGBTQ Youth. Lambda Legal and Child Welfare League of America. http://www.lambdalegal.org/sites/default/files/gdtb_2013_06_foster_parents.pdf This resource may also be copied and given to training participants for follow-up reading.

It is also recommended that the Facilitator be familiar with any state or local guidelines and licensing standards related to foster care and/or providing care for LGBTQ youth. If there are any published guidelines or polices these may be copied and distributed to participants.

⊡**Introduce** this module by reviewing the competency and learning objectives with participants.

Introduce the topic of this module by saying the following:

> This module is about the "nuts and bolts" of providing care for youth who identify as LGBTQ. But let's begin by acknowledging that LGBTQ youth are first and foremost youth. Like other youth, they have the need to belong, be accepted, to achieve, to be happy, and to be healthy and safe. If you as a foster/adoptive parent have been able to provide care for youth in diverse situations and from all walks of life, it is likely that you will be able to successfully provide care for a youth who identifies as LGBTQ. Yes, there are things you need to learn about and things that need to be considered. Your presence in this session indicates your willingness to do this. So approach the "nuts and bolts" (which sometimes gets challenging) with the same openness that has brought you success throughout your caregiving journey.

Make the following points:

- Thus far in this training we have focused on attitudes and beliefs; as well as how to best meet the needs of LGBTQ youth.

- Now we will focus on some of what we call the "nuts and bolts" of providing care for LGBTQ youth; or the day to day decisions, rules, and boundaries that may need to be addressed in order for you as a foster/adoptive or kinship parent to provide a nurturing and safe environment for everyone in your home.

- We recognize that many of you have questions about sleeping arrangements, supervision, safety issues, and behavioral expectations; and we hope to address some of these issues.

- Realistically this training will not be able to address all the issues or questions you may have about providing care for a transgender youth as in these situations you will likely need additional training and support, as well as the guidance of a team that might include medical personnel, mental health professionals, and transgender mentors.

- Likewise we will not be able to address every issue that might arise with LGBQ youth; every LGBQ is unique and different, just as every youth who is not LGBQ is unique and different.

- We will seek to address some major concerns and what is generally considered to be best practice or the best approach, but indeed you are working with individual and unique persons and everything is not always a "one size fits all".

- You will always be able to work with the child welfare team and we encourage you to ask for assistance and guidance related to any concerns you have about ensuring a nurturing and safe environment.

Acknowledge that you are aware that participants have had some burning "nuts and bolts" questions throughout the day. Ask participats why they think this module has been placed toward the end of the training day.

Encourage the following types of responses:

- So we would learn more about the topic and better understand the needs of LGBTQ youth.

- So we would have an opportunity to explore some of the myths about LGBTQ youth.

- So we would first explore our own attitudes and beliefs.

Summarize their responses and note that indeed it is best to explore and learn as much as possible before jumping in to address topics that may be challenging. Note that as the topics are addressed participants may be reminded of the research that was covered earlier, as well as some of the myths about LGBTQ people.

Ask participants to take the index card that is in front of them and to write down one of the "burning" questions they have about providing care for LGBTQ youth. If participants seem confused provide an example by saying that there are often concerns about things such as sharing bedrooms or how to handle dating situations. Explain that you will be taking the cards up but that no one will know who is writing what. When participants are finished take the cards up.

Record all (or some if the group is large) of the questions on an easel pad page.

Note to facilitator: *This needs to be done quickly. Some of the questions may be repeitive and many may belong in a grouping together. In these situations do not write them again, simply put a check to indicate that another person had the same or similar question. Record the first questions leaving space in between so you can record related questions together. If the group is large you may wish to use two easel pad pages.*

⌂**Note** that foster/adoptive and kinship parents most often identify concerns about providing care for LGBTQ youth in regards to the following two topic areas and point out examples from the list on the easel pad page:

Ensuring Safety:

Safety of family members and everyone living in the home
Safety of the LGBTQ youth

Managing Sexual Relationships and Behavior

Note that this module will deal with concerns related to these two areas and that many of the questions the group has identified will be addressed. Point out any areas that the training will likely not cover and suggest where participants may gain more information and training related to the topic.

Note to facilitator: *If there are a preponderance of questions related to transgender youth on the list note again to the group that all of the issues may not be covered. Acknowledge that all of the questions are relevant and important, but that parenting a transgender youth is admittedly a very challenging task and more training and assistance for the foster/adoptive or kinship parent would be needed beyond this 7 hour training. Note again that some issues related to transgender youth will be covered.*

Introduce the topic of safety by noting that of course foster/adoptive families want everyone in their home to feel safe. Note that safety concerns will be addressed through looking at sleeping arrangements, boundaries, and rules.

Remind participants that before beginning to address safety concerns it is important to review some of the information, research, and the myths that have been discussed earlier in the training, as well as some additional information.

⌂**Refer** participants to *Handout: Let's Get Real.*

- First and foremost, there is more to an individual than sexual orientation and gender identity expression. There are many factors that make a person who they are. Assuming that everything in a

persons life relates to their sexual orientation tends to focus your attention solely on sexual behavior.

- Youth who identify as LGBTQ are each unique and different, just as youth who do not identify as LGBTQ. Be careful of stereotyping or making assumptions because the youth identifies as LGBTQ.

- Being LGBTQ is not a choice. Youth who identify as LGBTQ generally know this. Therefore they are not usually interested in trying to convince others that they are LGBTQ, trying to "recruit" other youth to be LGBTQ, or trying to have sexual relationships with youth who are themselves not LGBTQ.

- There is no evidence to suggest that LGBTQ youth will force sex upon others at a rate that exceeds that of heterosexual youth.

- Some, though not all, LGBTQ youth have actually been exploited and/or sexually abused or have been forced into prostitution in order to survive on the streets. Further, many LGBTQ youth do not have the opportunity to view healthy LGBTQ role models or learn about safe and healthy LGBTQ sexual relationships. There are so many intervening factors due to the discrimination and difficulty that LGBTQ youth face, one cannot conclude that identifying as LGBTQ in and of itself makes one more highly sexualized or sexually active than someone who does not identify as LGBTQ.

Ask participants for reactions or discussion related to any of the points.

Note that the issue of sleeping arrangements always comes up and so this is a good starting point. Refer to the specific questions on the list (some of which will be directly addressed).

Ask participants what their fears are related to sleeping arrangments.

Expect the following types of responses:

o Afraid that a youth will force sex on another youth.
o Afraid that a non-LGBTQ youth will be uncomfortable in a room with an LGBTQ youth.
o I wouldn't know whether to put a transgender youth with a male or a female.
o Many youth are in foster/adoptive care due to sexual abuse and "sleeping arrangements" create a lot of stress for sexually abused

youth who might over-react or be triggered by sharing a room with an LGBTQ youth.

Validate their concerns and note that indeed we are concerned that everyone in the home feel safe and comfortable; but then challenge participants that some of the concerns may be heightened because of the stereotypes we have been addressing. Note that we need to be concerned about safety in the bedroom at all times regardless of sexual orientation or gender identity expression.

Refer participants to *Handout: Addressing Safety Concerns-- Sleeping Arrangements.*

Sleeping Arrangments:

There are often concerns about placing a LGBQ youth in a room with a youth who is not LGBQ (i.e., a gay male with a male who is not LGBQ). In most situations it is appropriate for an LGBQ youth to share a bedroom with a non-LGBQ youth. It may not be appropriate if either youth has been sexually abused by another youth or physically harmed by another youth. For example, an LGBQ youth was bullied and beaten by his room mate in a group home. When he entered foster/adoptive care he asked to be placed where he could have his own room.

In most situations it is appropriate for two LGBQ youth (i.e. two Lesbian youth) to share a bedroom. It would not be appropriate if the two were attracted to one another or were involved in any type of romantic or sexual relationship, just as you would not allow non-LGBTQ youth who were romantically or sexually involved to share a bedroom in your home.

Maintaining safety:

Regardless of sexual or gender orientation it is important that proper rules and protocol are followed to ensure "safety in the bedrom". Many youth in care have been sexually abused, or been physically violated in some way and thus sleeping arrangements and bedtime in general can be stressful regardless of sexual orientation or gender identity expression. Trauma informed care guides us to ensure safe environments for all youth, recognizing that we do not always know their history, past traumas, what has happened to them sexually or physically, or even what sexual orientation or gender with which they may identify.

- Every youth needs to have their own bed and space surrounding their bed.

- Every youth needs to have private space for changing.

- Everyone sleeps in their own bed—it is "private, safe" space.

- While acknowledging the need for privacy, explain to youth that you check on everyone in the house during the night to ensure everyone is okay. (Following guidelines for trauma informed care, recognize that this needs to be discussed with the youth. Youth with a history of sexual abuse may have a reaction to hearing someone enter the bedroom during the night.)

- In most cases you will want to ask youth to keep their bedrooms doors partially opened or cracked at all times. (Again, some youth may have an extreme need for privacy due to past exploitation and abuse, and this would need to be discussed.)

- Talk with each youth about what they need to feel safe and about any concerns they may have related to sleep, sleeping arrangements, and bedroom assignments. If a non-LGBQ youth is uncomfortable with a youth who identifies as LGBQ you would handle this concern like any concern between roommates. You would address the concerns, provide education, and assure good boundaries and safety. You would also check-in with the LGBQ youth to ensure they feel safe. If the concerns continued you would ask for assistance from the child welfare team.

This safety protocol would be advised for any and all youth placed with your family regardless of sexual orientation or gender, reason for placement, or situation.

Regarding transgender youth:

If providing care for a transgender youth it is important to have the full support of the child welfare team and for the youth to have an individualized assessment to help determine many aspects of how to best meet the youth's needs. Generally speaking it is recommended that transgender youth be treated and considered as the gender with which they identify, and not their gender of birth. In terms of sleeping arrangements, if it is possible, it is often recommended that a transgender youth have a private room. If this is not possible the youth's needs are likely best served by placement in a room with someone of the same sex with which the youth identifies. However, this is not always true. If the youth is likely to be bullied or harrassed, the need for safety would dictate otherwise. In either situation you would likely need the help and support of the child welfare team to assist you in preparing to meet the needs of

a transgender youth and to provide needed education and preparation for other family members. (including other youth placed in the home).

⬙**Refer** participants to *Handout: Strategies, Boundaries and Rules to Promote Safety* noting the importance of establishing a safe environment in the home. Remind participants of the data indicating that LGBTQ youth experience high rates of bullying, harassment, and abuse when placed in care—care that is suppose to ensure them of safety and well-being.

Establish an environment that is accepting of differences and celebrates diversity:

If you are thinking of providing care for an LGBTQ youth it is important to evaluate the degree to which you have an environment that is accepting of differences and celebrates diversity. The day of placement is really not the time to be considering this. As a foster/adoptive parent you establish an expectation of respect, have established rules to promote safety and respect, model acceptance, and establish that absolutely no bullying, harassment, or abuse is tolerated in your home *for any reason*. Work individually with each youth to promote values of respect and acceptance; and establish family meetings to both educate and discuss issues related to diversity, accepting differences, getting along, and ensuring that all family members feel safe.

Establish appropriate boundaries:

Ensure that all youth (and all family members) have privacy and their own space, and ensure this is respected within the family. In line with concepts of trauma informed care it is important to establish an understanding of physical boundaries—talking with youth about the need to respect privacy and space of others in the home. (Rules about not touching may not be as effective with older youth as talking openly with them about the reasons it is important to respect one another's physical boundaries.) Be aware that you are a role model and be sure to model appropriate boundaries. Respect the privacy of each youth, making sure you do not divulge information about their sexual orientation or gender unless they are prepared for you to do so. Establish an absolute expectation that no one will physically hurt another person in the family. Talk about safety—emotional and physical safety—as a critical goal for each and every person in the home and for the family as a whole.

Establish rules that promote safety:

While rules can often backfire with youth (who see them as a challenge), there is no doubt that rules related to safety are critial. However, equally important to establishing these rules is how they are presented to youth in your care.

Emphasize the importance of safety and your desire to provide a safe nurturing home for everyone in your care. Promote an understanding of the rules, the fact that the rules also serve to protect the youth, and seek to obtain a commitment and buy-in to estalishing a safe home. This is very different than simply presenting a youth with a long list of rules and demanding that the rules be followed. Further, with buy-in and commitment you promote an environment where everyone in the family recognizes the need for safety and seeks to promote safety. Establish clear rules against bullying, harassment, violence of any type, and emotional abuse. Establish rules and expectations that support boundaries and confidentiality. Review the rules in family meetings and work with family members to develop better or different rules, or to revise rules that are not working to promote safety.

Take allegations of bullying, harassment, and safety concerns seriously:

Finally, ensure that rules are consistently enforced and taken seriously. If a youth relates to you that he or she is being bullied or in any way feels unsafe in the home, the issue needs to be addressed. Be sure to involve members of the child welfare team as well as mental health and other professionals who can help you develop a good plan.

Work toward developing positive and strong relationships with all youth in your care:

This really goes without saying, but the more you communicate with and have positive relationships with youth in your care, the more willing they will be to share concerns with you, commit to your expectations and rules, and seek to work with you to ensure a safe home for all.

Ask participants if they have other suggestions regarding safety issues in the home.

Ask participants if there are questions or other concerns related to safety.

Refer participants to *Handout: What to Say, What to Do (Safety)* and conduct an activity designed to help participants identify steps and tasks to help ensure safety for youth and family members.

- Divide participants into small groups of 3-5 participants.

- Ask that the small groups answer the questions related to the case scenarios.

- Instruct each small group to identify a recorder/reporter.

- Tell participants they will have 15 minutes to complete the activity.

- Call time when there are three minutes remaining and encourage participants to complete the activity.

- Call time after 15 minutes.

Process the activity by reading each of the scenarios and asking the recorder/reporters to respond to the questions. The following will assist in helping you to direct the discussion:

15 year old Darla tells you that she is uncomfortable sharing a room with Carli because "Carli is a lesbo. " You ask Darla where she got this information. You are aware that Carli has been questioning her sexual orientation, but that she has asked that this be kept confidential. Darla explains that the kids at school told her. You have tried to cultivate a culture of acceptance in your home and are somewhat surprised by Darla's distress.

What do you say or do in the moment?
- Acknowledge Darla's distress and feelsings of discomfort.
- Remind Darla that one of your goals is for everyone to feel accepted and supported in the home.
- Point out to Darla that she does not know if the information she was told is true or not.
- Ask Darla if anything has happened that would make her feel uncomfortable or unsafe. (It likely has not but this is a good way for Darla to see that her concerns are related to what other kids are saying, and not because Carli has done anything to warrant her concerns.)
- Ensure that Darla feels that she has privacy when changing or showering/bathing; that she feels her boundaries are being respected; that she knows that she can continue to come to you with any concerns or issues.
- Provide some very basic education telling Darla that she may have some inaccurate assumptions about gay people and that you are available to talk to her over the next week about what some of her concerns may be, (regardless of whether Carli is or isn't a Lesbian.)
- Reassure Darla that you will look out for her safety as well as everyone else's in the home.

What do you say or do in the next week?
- Have a conversation with Carli to ensure that she is feeling safe and comfortable both in the home, as well as in the school.
- Portray acceptance and openness to Carli, and encourage her to talk to you about her process of "questioning" her sexual orientation. Without

pushing her, advise her that you are there to help her if she gets to the point where she wants to share her situation with others.
- Contact Carli's caseworker to let her know that the kids at school are talking about Carli's sexual orientation and that you are concerned that they could be bullying her or making life at school difficult for her.
- Contact Darla's caseworker to let her know that Darla has expressed concern to you and let her know how you are handling the situation.
- Continue to check in with Darla, explore her concerns, and provide education as needed, while being careful not to divulge confidential information.

16 year old Derrick is openly and some would say "flamboyantly gay." His behavior is driving everyone in the home crazy because he is very provocative and openly exploring his sexual orienattion, it seems, for many, all the time. He talks constantly about sex and makes fun of the other youth in the home for their lack of sexual experience. Derrick's roommate is 16 year old Miquel. The two boys have generally gotten along well, but Derrick's behavior has recently begun to anger Miguel. 13 year old Jared was placed with your family last week. Jared is small for his age, shy, and appears frightened of Derrick. You are stunned when Derrick comes to you and says that Miguel and Jared threatened to hurt him, and that Jared had a sharp hunting knife.

What do you say or do in the moment?
- Assure Derrick that he did the right thing by coming to you.
- Treat this as a critical situation. Immediately contact the caseworkers for each of the three boys for further direction. With Jared's caseworker assess the danger and how to best handle the situation with the knife. If Jared is at school you may search Jared's room for the knife.
- Follow through with the directions of the caseworkers, unless you are not comfortable or do not feel safe. In this situation call and ask to speak with a supervisor.

What do you say or do in the next week?
- Follow through with the child welfare team's recommendations.
- Reassure everyone in the home that safety issues will always be taken seriously and immediately addressed.
- If Jared remains in your home, work with the team to identify mental health treatment and/or other supportive services.
- Connect Derrick to a mentor or to an agency that deals with LGBTQ youth to provide him with positive role models, expose him to other LGBTQ youth for support, and to help him better understand how others may react to his behavior.

Remind participants again that they are encouraged to work with the child welfare team and other resources to address concerns that they have. Reassure foster/adoptive and kinship parents that they will have support and help in making the right decisions, but that they need to be comfortable in knowing that they can contact the team and ask assistance in a situation at any time.

Note that the next "nuts and bolts" topic that will be addressed is how foster/adoptive parents are to deal with LGBTQ romantic and sexual relationships. Refer to the list of questions on the easel pad page (if there were any) related to this topic and note that this is an area that is often confusing to caregivers.

Explain that this topic gets complicated because parents generally have varying ideas about dating and sexual development in general. Note that when sexual orientation and gender identity expression are thrown in, as well as the fact that many of our youth have had trauma experiences that have impacted their overall development, deciding what is appropriate can indeed be challenging.

Provide the following examples:

- If I asked you right now what age is appropriate for a teen to start dating I would probably get a variety of responses and we could spend a lot of time discussing our reasons. But even if after considerable time and debate we were able to come up with that "perfect age", how much sense might this make for a youth who has prostituted on the streets in order to survive? Or a youth who was sexually abused by an uncle from age 8 until age 12?

- You all know that our youth have had experiences that may both delay development, as well as speed up development. We have youth who cannot make good decisions, who are very immature in their social development, and who cannot problem solve. We have youth who have had life experiences way beyond their years, have provided care for younger brothers and sisters, and who have shown that they can survive under very challenging conditions. Sometimes these are the same youth. Thus establishing realistic expectations related to their sexual development is indeed a challenge.

- LGBTQ youth may have delayed identifying or even fully realizing their sexual orientation and/or gender identify. Thus their expression of this identity may be impacted. The youth may feel the need to make up for

lost time, or may be scared or frightened of their sexual and or romantic feelings.

Explain that the role of the foster/adoptive or kinship parent is to support the youth's development including sexual development. Supporting sexual development of youth tends to make adults feel uncomfortable (regardless of the youth's sexual orientation or gender identity expression). However, sexual development is part of normal development and no one would argue that it is our responsibility to help youth in all aspects of their development.

Acknowledge that LGBTQ issues may make the task a bit more challenging for the foster/adoptive parent. Point out that this is at least partially because of our own atittudes about LGBTQ youth, a lack of exposure to LGBTQ people and thus knowing what to expect, and a general concern/fear about handling a situation incorrectly.

⬀**Point out** that in fact there is a definitive guideline that may be helpful to us in determining how we handle LGBTQ romantic and sexual relationships, and read the power point slide:

> LGBTQ youth should be supported in adhering to the same rules that non-LGBTQ youth are required to follow and should have the same rights and privaleges that non-LGBTQ youth have regarding dating, displays of affection, and romantic relationships.

> *To Promote the Safety and Well-being of Lesbian, Gay, Bisexual, transgender, and Questioning and Youth at Risk of or Living with HIV in Child Welfare Settings*. Child Welfare League of America. 2012

Explain that this means:

> You handle these relationships in the same way you handle relationships between non-LGBTQ youth.

> You would have rules for safety that apply equally to LGBTQ youth and non-LGBTQ youth.

> You would work to promote a healthy understanding of sexuality, the health and emotional risks of promiscuity, and a healthy understanding of human relationships. You would do this with all youth in your home.

> You would be able to welcome the dates and friends of LGBTQ youth into your family in the same way that you would welcome dates and friends of non-LGBTQ youth.

You would not excuse or have a lower expectation of sexual maturity for a youth based on their sexual orientation or gender identity expression.

Refer participants to *Handout: What to Say, What to Do (Supporting Healthy Sexual Development)*.

- Ask participants to work with a partner.

- Direct the partners to answer the questions related to the case scenarios.

- Tell participants they will have 10 minutes to complete the activity.

- Call time when there are two minutes remaining and encourage participants to complete the activity.

- Call time after 10 minutes.

Process the activity by reading each of the scenarios and asking the recorder/reporters to respond to the questions. The following will assist in helping you to direct the discussion:

You have allowed 14 year old Tasha to bring her girlfriend Ana to the home for visits on Saturday. Tasha has told you how much she cares for Ana. You do not allow anyone to date until they are older and more mature, although you have not set a specific age. There is a rule that during the week there are to be no guests in the home until you return home from work. You have concerns that Tasha is very immature and you feel that she has experienced sexual abuse in her past, but this has not been confirmed. You are surprised to come home from work on a week-day and find the two on the couch, partially disrobed and laying together.

What do you say?

- Matter-of-factly ask the two girls to put their clothing on.
- Note that you did not give permission for Ana to be there and offer to take her home.
- Explain to Ana that she is welcome in your home but that you have rules that you will be discussing further with Tasha.
- Explain to Tasha that she has broken the rules and enforce the identified consequence.
- Explain to Tasha that her feelings and her behavior are normal, that you are not angry with her, and that is not why she has been given consequences; but tell her you do wish to have further conversations during the next week.

What do you do in the next week?
- Adhere to whatever consequence you have for breaking of rules.
- Open a dialogue with Tasha about her relationship, your expectations of behavior in the home, and age appropriate decisions regarding sex and romantic commitment—but without making her feel guilty.
- Note that sexual acts in front of other people generally make people uncomfortable, and that you did not like being placed in that position. Discuss the difference between displays of affection and displays of sexual behavior.
- If you do not have a rule regarding displays of sexual behavior in your home, you may wish to open a discussion and consider establishing a rule—again this should be done with input from Tasha and others in the home.

Points to make in the course of the discussion:

- While disconcerting to walk in on any couple who is partially disrobed and engaged in sexual activity, the behavior is generally normal for a youth age 14 who is experiencing romantic and sexual feelings.

- Emphasize that the consequences given to Tasha are related to breaking the rules (about Ana being in the home on a week-day, without permission, and without adult supervision in the home).

- It would be best not to react negatively to the sexual aspects of Tasha and Ana's relationships; but rather to talk about healthy relationships, safety, appropriate ways/times/situations to express affection and sexuality, and healthy decision making.

16 year old Demitri has been in your home for a year. During that time he has expressed that he is "questioning" his sexual orientation and gender identity expression. He has gone through phases of declaring that he is gay, then bi-sexual, and at times expresses that he wishes to change his sex. He claims he has been sexually active since age 12.   At dinner Demitri reveals to you that he is sexually involved with a 25 year old male and his 21 year old female partner. He will not tell you who they are as he realizes that he is underage.

What do you say?
- Explain to Demitri that you have concerns about his physical, sexual, and emotional well-being and for that reason you cannot support these relationships.
- Encourage him to participate in services at the local agency serving LGBTQ youth.

- Remind Demitri that you care about him and you have been through a lot with him.

What do you do in the next week:

- Contact Demitri's caseworker to discuss the situation.
- Continue to dialogue with Demitri to help ensure his safety and to help him understand his decisions and potential consequences.
- Refer Demitri to a therapist who is knowledgable of "Questioning" youth (if he is not already involved in therapy).
- Seek to connect him to a positive role model who is LGBTQ.

Points to make in the course of the discussion:

- Obviously there are concerns in this situation. (If Demitri were not LGBTQ you would not condone his invovlement with a 25 year old and a 21 year old.)

- Being angry or setting up rules will not likely to be effective.

- Helping Demitri connect to services and helping him better understand his situation and behavior are likely the best avenues to help him. His actions may may be a continuation of seeking to figure out his identity and deal with who he is.

Summarize the activity by recognizing that these are challenging issues and thanking participants for their willingness to determine how to best support the sexual development of LGBTQ youth.

Conclude this module by asking participants if there are any further questions.

MODULE SEVEN: SUPPORTING YOUTH IN THE PROCESS OF COMING-OUT

Time 45 minutes

Competency
Knows and understands how to support and affirm a young person in the process of "coming out".

Objectives

- Explain common issues around "coming out" and how they might affect young people in out of home care.
- Know that "coming out" is not about sexual behavior, but about the recognition and disclosure of one's self-identity and relational preferences; both of which are critical to psychological, emotional, and social development.
- Explain common issues around "coming out" and how they might affect young people in out of home care.
- Explain the potential consequence of social and emotional isolation and discrimination on sexual and gender minority clients.

Materials
Handout: Stages of LGBTQ Identity Formation
- ✓ Handout #17: Stages of LGBTQ Identity Formation
- ✓ Handout #18: Supporting Youth in the Coming Out Process
- ✓ Handout #19: What to Say, What to Do (Coming-Out)
- ✓ Handout #20: Supporting Transgender Youth

Facilitator's Notes

Note to Facilitator*: Prior to this module please review any county or state policies related to transgender youth in foster/adoptive care and residential/group care placement.*

⊡**Introduce** this module by reviewing the competency and learning objectives with participants.

Note that as discussed the foster, kinship, or adoptive family does have a role in helping the youth with the coming out process if and when the youth decides it is the right step to take.

Note that foster/adoptive parents have a responsibility to work with all youth in a way that will help youth feel comfortable in being honest about all facets of their life, and for LGBTQ youth this means helping them consider disclosing their sexual identity and orientation.

Ask participants why they think it is important for youth to "come out." Ensure that the following is covered:

- Isolation and keeping secrets is very difficult to do on an ongoing basis.

- The anxiety that results from being afraid of being "outed" is damaging to overall health and well-being.

- The sense of being alone and isolated can lead to depression or worsen mental health issues.

- "Coming out" provides the opportunity to mobilize support services on behalf of the youth to help them through all the challenges of coming of age as an LGBTQ youth—that is, until the youth"comes out" it is difficult to work toward more positive self esteem and to deal with issues such as discrimination and bullying.

Summarize the discussion by noting that one's sexual orientation is an important part of one's identity that impacts social, emotional, and psychological development. As noted throughout the training, feelings of social isolation can be overwhelming and place the youth at risk in all aspects of development. When youth "come out" there are many positive supports and opportunities and as professionals we can assist LGBTQ youth in building understanding within their families, schools, and communities.

Explain that "coming out" is a process of identity formation and cover these points:

- It is more helpful to think of "coming out" as a process of identity formation as opposed to something that suddenly "happens".

- Vivienne Cass first identified stages of identity development that treated gay people as "normal" in 1979. (Homosexual Identity Formation: A Theoretical Model. *Journal of Homosexuality*. 4(3)1979.)

- People may progress through stages at very different processes depending on individual personality, supports available, and cultural influences.   While the stages are helpful in laying out some critical steps in the process they are not meant to be a "one size fits all" prescriptive path. While the process is described as linear, it is likely that a peron may move back and forth as part of the process.

- As a child welfare professional these stages may be helpful to you in better understanding the thought process and the challenges that LGBTQ youth face in the formation of an identity that is not representative of the norm.

⬒**Refer** participants to *Handout: Stages of LGBTQ Identity Formation* and notes that these are stages identified by Gerald P. Mallon. After discussing each stage ask participants what they think the youth needs at that stage.

Stage One: I am NOT Gay
In total denial about the possibility
Rejection of the possibility based on fear, misinformation

What do youth need at this stage? Good accurate information, an affirming person that reminds them that no matter who or what they are they will be cared for.

Stage Two: Could I be gay?
Confused about what is happening, concerned about self-image, and recognition of feeling different from others characterizes this stage.

What do youth need at this stage? Good accurate information.

Stage Three: Suppose I was gay?
The person begins to imagine the possibility and try on the role. With this comes a greater sense of isolation, and fear of what might happen.

What do youth need at this stage? Resources such as LGBTQ books, websites, chat lines.

Stage Four: I think I might be gay or bisexual.
During this stage the person is seeking to make contact with other LGBTQ people in order to learn about gay identity and lower feelings of isolation.

What do youth need at this stage? A positive role model and positive contacts within the LGBTQ community.Continued education and support.

Stage Five: I am gay.
When the person fully settles into their identity there may be signficant effort to fit into the LGBT culture. Peer approval is tremendously important to the teen.

What do youth need at this stage? Youth need help connecting to positive gay peers and resources. Youth will need help with coming out, knowing what to expect, and finding supports.

Stage Six: I am gay. It is an integrated part of my identity.
At this stage the person is able to integrate LGBT identity into every facet of life.

***** *Mallon, G.P. Let's Get this Straight: A Gay and Lesbian Affirming Approach to Child Welfare. New York: Columbia University Press. 2000; and We Don't Exactly Get the Welcome Wagon: the Experiences of Gay and Lesbian Adolescents in Child Welfare Systems. New York: Columbia University Press. 1998.*

⌂**Refer** participants to *Handout: Supporting Youth in the Coming Out Process* noting that once youth disclose there are several things the child welfare team can do to help the youth.

> **Support youth in taking the lead in the coming out process.**

Use terminology that the youth uses without attaching labels. While you can help youth with definitions and terminology, it is up to the youth to decide the language they wish to use.

Work with the youth to determine who they wish to tell, the impact it might have, and ways to approach disclosure. Disclosure is a very personal choice. You are there to support and guide, but not to direct.

Assure the youth of confidentiality. As with other case related information, without the client's permission, the information is confidential.

Provide support and affirmation through the process.

Affirm and support the youth's identity, expression, and orientation in a patient and accepting way.

Help the youth explore their feelings, fears, and reactions as they move through the process. Know that youth have different responses. Assure the youth that their feelings and/or confusion are normal. Be prepared to provide accurate information and clarification regarding myths and stereotypes.

Help the youth explore possible consequences of coming out and what the youth may need for support.

Recognize the youth's strengths and assets in all facets of life, helping the youth develop pride and an overall positive sense of self. Encourage talents, hobbies, interests, educational endeavors, and skills.

Maintain an open dialogue about safety and overall well-being in all aspects of the youth's life and develop safety plans as needed.

Assess the youth's sense of safety on an ongoing basis.

Listen to a youth's fears and concerns about the reactions of family. Remember you are working with youth who are involved with the child welfare system and by definition may have experienced family violence, emotional abuse, and neglect. Family visits as well as family reunification needs to be planned and monitored with safety concerns in mind.

Discuss the school environment and the youth's concerns about the reactions of teachers, friends, peers, and others. As noted previously the school environment can be extremely hostile to LGBTQ youth, and the use of social media has even heightened the impact. Be prepared to intervene as needed.

Be comfortable and prepared to discuss (or refer the youth to someone who can) safe sex, HIV, and related risks. LGBTQ youth are at higher risk of sexual exploitation.

Connect the youth to community resources. LGBTQ youth need peers, mentors, and professionals who identify with LGBTQ issues. Regardless of how supportive you may be it is critical that the youth connect with a community of LGBTQ people, and with services/programs that can provide ongoing support.

Identify local resources that support LGBTQ youth.

Ensure health care with a clinic that is supportive and knowledgable of the needs of LGBTQ youth.

Encourage connection with supportive peer and gay/straight alliances in the school setting.

Try to identify a mentor or older peer to provide ongoing support to the youth.

Refer participants to *Handout: What to Say What to Do (Coming Out)*

- Tell participants in this activity they will have the opportunity to think about ways to talk with youth that will promote positive engagement and be viewed as affirming to the youth's identity.

- Explain that they will take each statement and identify potential responses.

- Divide participants into groups of three.

- Ask participants to work quickly as in real life there will not be a lot of time to think through responses and the activity is

designed to help prepare participants to think quickly on their feet.

- Instruct participant to identify specially what they would say. (For example do not indicate "I would say something supportive.")

- Note they will have 8 to 10 minutes to complete the activity.

Process the activity using the following notes:

Josh tells you that you are going to be upset with him as he got in trouble at school. You have suspected that Josh has been questioning his sexual orientation and you have tried to show an acceptance and openness around LGBTQ issues. He tells you that he was holding hands with his friend Devon and they both got called to the office.

What do you say?

Examples: "Oh Josh this must be confusing for you. You've found a special person but now you feel like you're in trouble?"
"Thanks for letting me know this Josh. I'm glad you trust me."
"I just want you to know that I'm not upset with you. We have a lot to talk about but I'm certainly not upset with you. "

What do you do?

- Continue to discuss with Josh to find out how you might be able to support him.
- Talk with the school and determine what their policies are about student contact. If needed you would want to advocate with the school to ensure that rules about physical contact are applied the same regardless of gender or sexual orientation.
- Explore with the school how they are supporting Josh, his process of coming out, and the impact on his over-all development.

Daniel came to your home 3 months ago after threatening to assault his father. The parents told the judge they could not control his behavior. He has not spoken with you beyond one or two sentences. You told that was okay and reiterated what you always say to youth—that you are open to hearing about all kinds of situations, nothing will shock you, and you believe that no matter what there are usually ways to help situation get better. Today when you walk in he immediately tells you he has something to tell you but you cannot tell his

parents. He says, "I know you said that you could handle anything. But I bet you can't. So here goes. For starters, how about calling me Danella.

What do you say?

Examples: "Okay, Danella. So what else do you want to tell me?"
"I think you're wrong about that Danella. I'm ready to hear you."

What do you do?

- Continue the dialogue to determine what supports Danella will need.
- Find out if Danella has any supports and/or has come out to anyone else.
- Help Danella develop a plan for "coming out"—who she will speak with, who she needs help to tell etc.
- Ensure that Danella is provided with appropriate health care and medical information related to transgender issues.
- Assess Danella's safety needs and put into place any safety plans that are needed.
- Connect Danella with a support group/organization/mentor that can help her with what is happening.

The school has asked you and the foster parent to come immediately to the school as 13 year old Michelle was in a fight with a group of girls. When you arrive Michelle runs to you crying and tells you the girls were making fun of her. When you ask her why she breaks down and says it is because she has a girlfriend. She hysterically begs you not to tell her caseworker or the school personnel. Then Mrs. Scott, the Assistant Principal, comes out to tell you the meeting will begin in five minutes.

What do you say?

Examples: "Michelle you are going to get through this. This is going to be hard but I am here to help you."

"It is wrong when people make fun of other people for any reason. But when you get in fights we do have to deal with it. I am not going to tell this to anyone in this meeting right now. But it might be helpful to Mrs. Scott if she better understood what happened. That is your decision though. I am here to support you no matter what."

What do you do?

- Advocate to the extent possible for the school to better understand the precipitants of the fight.

- Explain to Michelle that the caseworker needs to be told but you will work with her to plan out how this will happen and how you will help.
- Assess the school's willingness to be accepting and affirmative to Michelle and advocate as needed.
- Offer to get Michelle information about LGBTQ issues and to connect her with LGBTQ supports.
- Continue to talk with Michelle to help her in her continuing process of coming out.

Note that resource families are often confused about working with transgendered youth because they do not have good information and/or lack a basic understanding of transgender issues.

Refer participants *to Handout: Supporting Transgender Youth* and ask that participants work in pairs. Instruct participants to first read the resource and then answer the questions on the second page.

Process the pairs activity. The following will assist you in the discussion:

> **Note to Facilitator:** *Be aware prior to the training of your state or county's policies regarding transgender youth in placement so that you can better assist participants in answering the questions.*

Discuss your experiences working with transgender youth and the degree to which these practice guidelines were utilized.

- *Realize that historically child welfare has not adhered to most of these guidelines nor had a good understanding of the needs of transgender youth. Be encouraging of all responses (even those indicating that these practice guidelines were not utilized) noting that this only highlights the need for greater awareness and training in this area. Commend participants for participating in the training and desiring to improve practice.*

Which of the guidelines do you think are most challenging to follow? Why?

- *Participants will likely have a lot of concerns about how to address transgender issues to ensure appropriate boundaries and safety. There are many genuine issues related to safety when transgender youth are in placement as this is a group that is targeted for bullying, harassment, and sexual abuse. Encourage participants to connect with LGBTQ resources, medical resources, and internal child welfare staff with expertise in LGBTQ issues with very specific questions and concerns.*

In the foster/adoptive care or group care setting how do you ensure safety without isolating or segregating the transgender youth from others?

- *Facilities and foster/adoptive homes are usually encouraged (or sometimes required) to provide a private bedroom and to ensure privacy and good boundaries around showering and self-care. However, this can also be isolating for the youth and make the youth stand out as different if shared quarters are utilized in the rest of the home or facility. Workers have a responsibility to seek out placements that will best meet the needs of a transgender youth. Youth whenever possible should have input into placement decisions so that they can advocate to be in a setting where they feel they will be safe and supported. Note in the next module the group will be looking in more depth about how to manage safety on a day to day basis in the foster/adoptive home.*

Note that the *Getting Down to Basics: Toolkit to Support LGBTQ Youth in Care* (CWLA and Lamba Legal) has a number of resources that can be copied and used with youth. The toolkit can be found by entering the title in a searxch engine.

- The resource "Information for LGBTQ Youth in Care" can be copied and given to any youth with whom you are working who identifies as LGBTQ. This resource is a good tool to generate conversation, provide education, give an overview of legal rights, and connect the youth to further resources on the internet.

- The resource "Working with Transgender Youth" can be copied and given to anyone on the child welfare team working with a transgender youth. The resource provides good overview information and connections to further resources.

MODULE EIGHT: ADVOCACY AND COMMUNITY CONNECTIONS

Time
25 minutes

Competency
Knows and understands how to advocate for LGBTQ young people in their home, school, foster/adoptive care setting, and community.

Objectives
- Describe two advocacy strategies for supporting LGBTQ young people.
- Describe two challenges a LGBTQ youth might face in their family, school, community, or church; and identify advocacy strategies.

Materials
- ✓ Handout #21: Advocating for LGBTQ Youth
- ✓ Handout #22: What to Say? What to Do? (Advocacy)

⊠**Introduce** this module by reviewing the competency and learning objectives with participants.

Note that one of the most critical roles the foster/adoptive parent or kinship caregiver can play is to advocate for LGBTQ youth.

- Resource families have a responsibility to advocate from a systems perspective for the health and well-being of all the different populations served.

- We all saw earlier in this training the dismal statistics regarding how our LGBTQ youth are faring within the child welfare system, thus it is painfully obvious how important it is that we advocate for our LGBTQ youth and teach them to be advocates for themselves.

- Resource families therefore have a responsibility to advocate for services to assist LGBTQ youth, promote a more accepting community, and advocate for laws and practices that protect the dignity and safety of LGBTQ youth.

- Resource families also have a responsibility to advocate on an individual level for the health, safety, and well-being of each client.

- For families working with LGBTQ youth this means advocating for services that are competent and affirming; that the youth's basic rights are protected; and that the youth is safe at home and in the community.

Note that in this module we will primarily be looking at how the foster/adoptive family or kinship family needs to advocate for services and supports to help ensure safety, permanence, and well-being for LGBTQ youth in the school and other service providers.

⊠**Remind** participants of the data regarding the high incidence of bullying of LGBTQ youth in the school setting.

- ✓ In fact, the National Education Association reports that 1 in 3 LGBTQ students missed at least one day of school in the past month because they felt unsafe, compared to less that 5% of all students.

- ✓ While protecting all youth from bullying in our schools is important, it is clear that LGBTQ youth are particularly at risk.

Refer participants to *Handout: Advocating for LGBTQ Youth* and review the first portion related to safety and well-being in school.

> Advocating for safety and well-being in the school setting:

- Assess with the youth what their experiences are in the school setting and whether or not there are safety or other concerns.

- If there are safety concerns be sure to bring these to the caseworker's attention, as it is the caseworker's responsibility to ensure the youth's safety.

- Take any safety concerns seriously and work with the youth to develop a plan to address the concerns with the school.

- Take a leading and supportive role in meeting with the school and addressing safety concerns.

- If a youth who is being bullied or harmed is adamant that you not contact the school this needs to be brought to the caseworker's attention. While we know that the issue needs to be addressed, it is critical to respect the youth's sense of danger and risk. Blindly leading an effort with a school that is not supportive or acepting of LGTBQ youth can place a youth in greater danger. Work with the child welfare team (including legal staff) to develop a plan to address the situation.

- Encourage the youth to participate in the Gay Straight Alliance or other school sponsored group for youth who identify as LGBTQ. GLSEN (the Gay Lesbian Straight Education Network) research shows that youth involved in gay straight alliances perform better in school and have high self-esteem.

- Be prepared to advocate with classroom teachers on behalf of the youth. Remember that most LGBTQ youth in care have experienced signficant trauma that can impact behavior and learning.

Ask participants to share any experiences they have had working with the schools on behalf of LGBTQ youth.

Refer participants to the handout and review the portion related to ensuring safety and well-being with service providers.

Advocating for safety and wellbeing with service providers:

- Prior to beginning a service meet with potential providers to ensure they are competent and affirming of LGBTQ youth, that staff are comfortable using language that is not exclusively heterocentric, and that the environment provides supportive messages (presence of Rainbow or Triangle symbols).

- Develop a positive relationship with the youth so they will contact you with concerns.

- Listen to the youth and take safety concerns about any service providers seriously. Work with the youth to develop the best way to address the concerns.

- Ensure that no program, clinic, therapist, or service provider pursues therapies geared at changing sexual orientation or identity.

- Ensure that the program is providing youth with needed LGBTQ resources and appropriate supports.

Ask participants to share any experiences they have had working with other service providers on behalf of LGBTQ youth.

Refer participants to Handout: *What to Say, What to Do? (Advocacy)*

- Tell participants in this activity they will have the opportunity to think about ways to advocate for the safety and well-being of LGBTQ youth.

- Explain that they will take each situation and identify potential responses.

- Divide participants into groups of three.

- Ask participants to work quickly as in real life there will not be a lot of time to think through your response and the activity is designed to help prepare participants to think quickly on their feet.

- Instruct participant to identify specially what they would say.

- Note they will have 8 to 10 minutes to complete the activity.

Process the activity by using the following notes:

Latoya, a 16 year old lesbian who lives with you wants to go to her junior prom with her girlfriend, who goes to the same school.   You have struggled with how to deal with Latoya's coming out and openness around her sexual orientation but have been supportive overall. Latoya comes home with a letter from the school stating they will not permit her to come with a date of the same sex. Latoya comes in very angry and asks you to help her.

What do you say?

Examples:

"I think we need to go together to talk with the school."

"Yes, I am willing to help you on this. Let's do a little research. Let's go to the Lambda Legal website and get some guidance."

"I would like to talk with your caseworker and ask her how we can all work together on this."

What do you do?

- Plan with Latoya a strategy for advocating with the school to allow her to attend.
- Seek to educate the school staff
- Get Latoya involved with LGBTQ support groups such as the Gay Straight Alliance (if there is one)
- Help the school explore establishing a Gay Straight Alliance if there is not one

Crystal, a 15 year old transgender (male to female) got beat up in the back room of her day drug treatment program. Crystal was wearing a dress, heels, and make-up. The staff in charge contacts you noting they are taking her to the emergency room although there are no visible physical injuries. They are concerned that she is hysterical and won't stop crying.

What do you say?

Examples:

"I will meet you at the hospital. And I want to speak with Crystal right now."

"What steps are in place to ensure Crystal's safety? If Crystal is able to come back tomorrow I will be coming with her to talk about her safety."

What do you do?
- Go to hospital immediately.
- Contact the caseworker immediately to report what has happened.
- Determine if there is a need for Crystal to have a psychiatric consultation at the hospital.
- Ask for victim assistance at the hospital.
- Determine with victim services at the hospital if police need to be contacted.
- Prior to Crystal returning to the program ensure that an effective safety plan has been put into place.
- Ensure that an investigation is completed and that all agency reporting requirements are fulfilled
- Explore if Crystal feels safe to continue the program.
- Explore what other supports Crystal might find helpful.

Summarize the activity by noting the importance of advocating for specific youth needs as well as advocating for programs, services, and schools to become more LGBTQ affirming.

MODULE NINE: CLOSING AND EVALUATION

Time
10 minutes

Competency
Identify ways to increase one's own competency in working with LGBTQ youth and families.

Objectives
- Evaluate one's own competence in working with LGBTQ youth and families.
- Develop an action plan to identify specific tasks to increase learning and competence in working with LGBTQ youth and families.

Materials
- ✓ Easel pad and markers
- ✓ Original card
- ✓ Handout #23: LGBTQ Resources
- ✓ Handout# 24: Action Plan
- ✓ Participant Evaluation

Facilitator's Notes

⊡**Review** the competency and objectives for this session.

Ask participants to take out the index card they completed in Module Three where they identified a stereotype or belief that they held regarding people who identify as LGBTQ.

Ask each participant to share how their beliefs have changed or been influenced by what they have learned in the training.

Bring out the easel pad page from the morning where participants identified the skills they wished to gain or improve by attending the workshop. Review the list and determine what learning goals were met. If there were areas that were not covered try to direct participant to additional training, a resource, or a website.

Distribute *Handout: Action Plan* to each participant and give them five minutes to complete the form. State that this form is to be shared with their caseworker and the training unit will follow-up on the results in one of our Webinars.

Distribute the Participant Evaluation.

Thank the participants for their participation throughout the day.